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County of Los Angeles CHIEF EXECUTIVE OFFICE

Kenneth Hahn Hall of Administration
500 West Temple Street, Room 713, Los Angeles, California 90012
(213) 974-1101
<http://ceo.lacounty.gov>

WILLIAM T FUJIOKA
Chief Executive Officer

February 19, 2010

To: Supervisor Gloria Molina, Chair
Supervisor Mark Ridley-Thomas
Supervisor Zev Yaroslavsky
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: William T Fujioka
Chief Executive Officer

Board of Supervisors
GLORIA MOLINA
First District

MARK RIDLEY-THOMAS
Second District

ZEV YAROSLAVSKY
Third District

DON KNABE
Fourth District

MICHAEL D. ANTONOVICH
Fifth District

REPORT - POSITIONS ASSOCIATED WITH THE GENERAL RELIEF RESTRUCTURING PROCESS

On February 9, 2010, your Board approved the General Relief (GR) Restructuring Plan (Plan) including implementation plans for 27 Phase One and 15 additional Phase Two workgroup recommendations. The Plan includes the addition of 45 positions in the Departments of Public Social Services (DPSS), Health Services (DHS), Mental Health (DMH), Public Defender (PD) and Sheriff. Your Board instructed the Chief Executive Officer to determine, 1) whether additional budgeted positions were requested; 2) whether the new functions could be absorbed through the use of vacant budgeted positions in each of the listed departments; and 3) if vacant budgeted positions are used, would all of the one-time funding allocated for GR Restructuring positions continue to be needed.

The CEO has confirmed that the Plan, as submitted to your Board, does include the addition of 45 budgeted positions in the five participating Departments listed above. The breakdown by department includes 28 for DPSS; three (3) for Sheriff; ten (10) for DHS; three (3) for DMH; and one (1) for Public Defender. Classification information for each of these positions is available in Attachment I. Our review, to determine whether or not existing budgeted vacant positions within each Department could be used to satisfy the need outlined in the Plan, revealed that all of the Departments have sufficient vacancies that can be used. Also, while the Departments do have sufficient budgeted vacant positions that can be used to satisfy the identified need, the classifications may not be an exact match. In instances where the budgeted classifications do not match the functions to be performed, Section 6.06 of the County Code delegates authority to the CEO to fill positions to meet our business needs, as long as the vacant classification is of equal or higher level.

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In addition, we have the authority to change the status of the classification from "A" to "N". The CEO will work with these Departments in order to achieve this purpose.

The primary goal and achievement of the GR Restructuring process is the development of new strategies to deliver more effective services to the population of GR participants. These services are in addition to, or enhancements of, services that participating Departments already provide. Without a dedicated funding stream, the enhanced services would result in more cost and potentially reduced core services, provided by the participating Departments. Therefore, it was determined that the GR Restructuring Plan must be a self-funded plan.

The Plan will draw down new revenues, and reinvest federal reimbursements and a portion of the anticipated savings to generate needed funding. This funding will sustain the program without diminishing the resources of the participating Departments. The one-time funding of \$7.2 million, previously approved by your Board and budgeted in the current Fiscal Year 2009-10 Adopted Budget, therefore remains necessary for plan implementation and to leverage the newly identified revenues. The funding will be utilized as start-up funding, after which the program will become self-funded and self-sustaining.

The generation of savings and new revenues will not occur immediately upon implementation. Therefore, based on the model of a self-sustaining program, it is recommended that the \$3.4 million (which is included in the total \$7.2 million allocation) of one-time funding earmarked for the 45 GR Restructuring positions, remain dedicated for the initial period of salary and employee benefits costs in the participating departments. If at any time, the funding is insufficient to sustain the program, the program will be reevaluated, and if necessary, positions will be removed from the GR Restructuring program.

If you have any questions or need additional information, please contact me or your staff may contact Jacqueline White, at (213) 974-4530, or via email at jwhite@ceo.lacounty.gov.

WTF:JW:DS
JB:cvb

Attachments

c: County Counsel
Executive Office, Board of Supervisors
Director, Health Services
Director, Mental Health
Public Defender
Sheriff's Department

General Relief Restructuring Plan

Requested Positions

Department of Public Social Services

Number	Position	Workgroup Recommendation (Board letter attachment 1)
22	GAIN Services Worker	#5 Enhance Subsidized Housing & #12 Modify WtW Services
3	GAIN Services Supervisor	#5 Enhance Subsidized Housing & #12 Modify WtW Services
3	Program Assistant	#5 Enhance Subsidized Housing & #6 Pilot Project: Non-profit Housing Developer & #12 Modify WtW Services
28		

Sheriff's Department

Number	Position	Workgroup Recommendation (Board letter attachment 1)
1	Custody Assistant	#3 Integrated DPSS / Sheriff Services
1	Registered Nurse	#9 SSI Advocacy: Document Retrieval
1	Clerk	#9 SSI Advocacy: Document Retrieval
3		

Department of Health Services

Number	Position	Workgroup Recommendation (Board letter attachment 1)
7	Registered Nurse	#9 SSI Advocacy: Document Retrieval
3	Clerk	#9 SSI Advocacy: Document Retrieval
10		

Department of Mental Health

Number	Position	Workgroup Recommendation (Board letter attachment 1)
2	Registered Nurse	#9 SSI Advocacy: Document Retrieval
1	Clerk	#9 SSI Advocacy: Document Retrieval
3		

Public Defender

Number	Position	Workgroup Recommendation (Board letter attachment 1)
1	Psychiatric Social Worker	#11 SSI Advocacy: For GR Participants who are PD clients

45 Total General Relief Restructuring Positions

COUNTY OF LOS ANGELES
BOARD OF SUPERVISORS

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County of Los Angeles CHIEF EXECUTIVE OFFICE

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WILLIAM T FUJIOKA
Chief Executive Officer

July 2, 2010

Board of Supervisors
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MICHAEL D. ANTONOVICH
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To: Supervisor Gloria Molina, Chair
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From: William T Fujioka
Chief Executive Officer *Benji Jr*

GENERAL RELIEF RESTRUCTURING PLAN: QUARTERLY UPDATE

This is to provide a report on the progress of the implementation of the General Relief (GR) Restructuring Plan.

On April 24, 2009, on a motion by Supervisor Knabe, your Board instructed the Chief Executive Officer (CEO), in collaboration with the Department of Public Social Services (DPSS), and consultation with County Counsel, to design a potential GR program that will better assist GR participants, with the expectation that more of these individuals would be able to transition off of County assistance. In response, the GR Restructuring Workgroup, consisting of 11 County departments and ten stakeholders, was convened. On February 9, 2010, your Board approved the comprehensive plan to restructure the GR Program. This plan consisted of 42 recommendations designed to reduce the GR caseload over time by focusing services on housing assistance, Supplemental Security Income (SSI) advocacy and employment preparation.

The GR Restructuring Workgroup members were invited to participate in various workgroups that were convened by DPSS to assist in the implementation of the plan. Several internal DPSS meetings, and meetings with other County departments and community stakeholders, have taken place to discuss the implementation of the various GR Restructuring projects. As a result of the great support and collaboration from the different partners, four GR Restructuring Recommendations have already been implemented and we anticipate that seven more will be implemented in July 2010. The attached chart provides the status of all 42 approved workgroup recommendations.

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Approved Workgroup Recommendations that have been Implemented

- Recommendation No. 13, collaboration with Department of Children and Family Services (DCFS) and the Probation Department to connect youth to existing American Recovery and Reinvestment Act (ARRA) funded projects: DPSS has established collaboration with DCFS and Probation Department to facilitate referrals to General Relief Opportunities for Work (GROW) services, including ARRA funded services. DPSS has designated a liaison to work with both departments on this effort.
- Recommendation No. 14, pursuit of federal reimbursement through Food Stamp Employment and Training (FSET) for supportive services to GROW participants: The State approved DPSS' FSET plan; therefore, reimbursement through FSET for costs associated with support services to GROW participants can be claimed effective October 2009.
- Recommendation No. 20, inclusion of the GR Program in the County's and DPSS' Strategic Plan: The GR Program has been incorporated in the County's and DPSS' Strategic Plan.
- Recommendation No. 25, addition of positions utilizing ARRA to assist participants navigate the GR process: Six participants are currently working as Customer Services Assistants (CSA) in the GR district lobbies. Four additional participants are in the final stages of the hiring process.

Approved Workgroup Recommendations that are Targeted for Implementation in July 2010

- Recommendation No. 5, expansion of the Housing Subsidy Project: The protocols for this Project have been drafted and are in the clearance process. Orientation and training has been provided to project staff, and interim Los Angeles Eligibility, Automated Determination, Evaluation and Reporting (LEADER) modifications are in progress and will be finalized in July 2010.
- Recommendation No. 9, retrieval of medical records on behalf of GR participants applying for SSI: DPSS continues to work with the Departments of Mental Health (DMH) and Health Services (DHS) and the Sheriff's Department (LASD) on finalizing the implementation of this project. The protocols for this project have been drafted and are in the clearance process. Training has been provided to all DPSS project staff. DHS, DMH, and LASD are working on obtaining the staff needed for this project; four Registered Nurses have already been hired.

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- Recommendation No. 16, expand GROW to include GED preparation: DPSS is finalizing policy/procedures to implement a GED component for GROW participants who lack a high school diploma. A list of available education entities has been identified.
- Recommendation No. 17, conducting a comprehensive study of the Mandatory Substance Abuse and Recovery Program (MSARP): CEO-Service Integration Branch (SIB) shared a draft report, which is currently under review by DPSS.
- Recommendation No. 27, establishment of a GR Anti-Homelessness Account: DPSS is currently working with the CEO to establish the GR Anti-Homelessness Account.
- Recommendation No. 32, ancillary expenses for GR participants pursuing SSI: Meetings are under way with the responsible workgroup to finalize the implementation of this project.
- Recommendation No. 42, quarterly meetings of the GR Restructuring Steering Committee: The GR Restructuring Steering Committee will be having their first quarterly meeting in July 2010.

We will provide the next quarterly report in October 2010.

WTF:BC:KH
JB:lpj

Attachment

c: Executive Officer, Board of Supervisors
County Counsel
Public Social Services

DPSS.bm

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
JUNE 30, 2010

Attachment

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
1	Subject to applicable confidentiality requirements, use the Adult Linkages Project mechanism to identify the County service history of GR applicants/participants, so that applicants/participants can be offered services that take into account the totality of their individual circumstances.	In June 2010, the CEO approved funding for the one-time cost of implementing this recommendation. A preliminary meeting with the responsible workgroup partners to discuss the project's course of action will be scheduled for July 2010.	FEBRUARY 2011
2	The County should develop an innovative service integration model that can support County departments, other governmental entities, and community partners in concurrently serving a shared clientele.	A preliminary meeting will be scheduled with CEO and DHS staff in July 2010 to discuss the course of action for the pilot.	OCTOBER 2010
3	Increase integration of services between the Sheriff's Department and DPSS by: <ul style="list-style-type: none"> A. Developing a plan to enhance the current County jail match to identify individuals who are incarcerated and have a linkage to GR benefits, to provide pre- and post-release services and SSI Advocacy that will assist with their re-entry into society. B. Assessing the DPSS/Sheriff's Homeless Release Project to determine its effectiveness. C. Implementing a review protocol to determine whether any outstanding warrants remaining on the GR/SSI applicant's record should be cleared, recalled or withdrawn. D. Ensuring that probation, parole, and other warrants that should have been satisfied by a GR/SSI applicant's stay in jail have been withdrawn or recalled. E. Appointing a liaison for individuals with outstanding warrants whom advocates and County employees can contact directly to: (1) inquire about the underlying reason and validity of a warrant and (2) assist the SSI advocate in "clearing up" the warrant. F. Referring disabled individuals exiting jail who apply for GR to a SSI advocate/liaison, in order to re-establish SSI benefits and work with agencies (i.e., probation, parole, public defender, courts, etc.) to recall existing warrants. G. Referring disabled individuals exiting jail who do not have SSI benefits to GR SSIMAP for benefits establishment. 	A meeting will be held in July 2010 with the Sheriff, Probation and Public Defender Offices.	AUGUST 2010

Attachment

**GR RESTRUCTURING MASTER IMPLEMENTATION CHART
JUNE 30, 2010**

NO.	APPROVED RECOMMENDATIONS	TARGET IMPLEMENTATION DATE
4	Encourage police agencies to make social services referrals for the homeless and connect them with resources, rather than issuing citations.	AUGUST 2010
5	<p>The Long Beach Police Department and LASD provided an overview of their services to the homeless population. A follow-up meeting will be scheduled in July 2010 with the Los Angeles Police Department and Community Advocates to discuss services to the homeless population in the LA area. The purpose of the meeting is to discuss a referral process for law enforcement agencies to connect homeless individuals with resources.</p> <p>DPSS conducted several meetings with the responsible workgroup to discuss the implementation plan for this project. Draft protocols were shared with the workgroup and comments were incorporated. The final draft of the protocols is currently in the clearance process.</p> <p>Orientation and training was conducted on May 18, 2010 and May 19, 2010 to all project staff from the six pilot Districts. Training for other affected staff will be conducted in July 2010. Interim LEADER modifications are in progress and will be finalized in July 2010. Full automated process is scheduled to be completed by the end of August 2010. Project is targeted for implementation in July 2010.</p> <p>An exploratory meeting with two large Board and Care agencies that currently provide services to GR participants to discuss other housing options for homeless GR participants was held on June 23, 2010.</p>	JULY 2010

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
JUNE 30, 2010

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
F	<p>Pursuing federal reimbursement for housing subsidy payments made to employable GR participants through the Food Stamp and Employment Training (FSET) fund at a rate of 50%; and pursuing reimbursement for housing subsidy payment made to GR participants who are approved for SSI through the Interim Assistance Reimbursement Program, at a rate of 100%.</p> <p>G. Reinvesting the money recouped from SSI (Interim Assistance Reimbursement for housing subsidies) in additional housing subsidies.</p> <p>H. Recruiting participants for the Housing Subsidy and Case Management Program during the GR intake process and making additional efforts throughout the course of case management to encourage participants to remain in the Housing Subsidy and Case Management Program and identify causes of participants dropping out of the subsidy.</p>		JANUARY 2011
6	<p>Implement a pilot project (subject to a cost benefit analysis) by master leasing and/or purchasing foreclosed apartment buildings and/or multi-family housing units and/or dorm-like housing to be provided for the indigent homeless population. This housing should be owned and/or operated by a non-profit housing developer and/or homeless service provider with expertise in managing housing with services.</p> <p>Address supportive housing needs by:</p> <ul style="list-style-type: none"> A. Exploring housing options for mentally ill participants through City and County Housing Authorities and other smaller Housing Authorities throughout LA County. B. Identifying and leveraging County funding for housing resources and related services that already receive county funding or support. 	<p>A preliminary meeting will be scheduled in July 2010 to discuss the implementation plan for this pilot project.</p>	DECEMBER 2010
7	<p>Subject to detailed operational and fiscal planning during Phase Two of the GR Restructuring process, eliminate the current cursory employability/NSA screening and replace it with a more extensive medical/mental health disability assessment performed by (1) DMH, (2) DHS or possibly</p>		DECEMBER 2010
8		<p>Meetings were held with DMH and DHS regarding the implementation of the Disability Assessments/Comprehensive Evaluations.</p>	DECEMBER 2010

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
JUNE 30, 2010

No.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
	<p>DPH, and/or (3) DHS Public Private Partners (PPPs). For permanently disabled participants in need of additional documentation to support their SSI applications, a comprehensive medical/mental health evaluation would be performed. The extensive assessments and the comprehensive medical and mental health evaluations and write-ups will be funded with 50 - 75% new federal revenue.</p>	<p>Mental Health Disability Assessment</p> <p>A draft of the mental health disability assessment tool was developed and it will be tested in two DPSS Pilot Offices. At the conclusion of the short-term pilot, DPSS will evaluate the assessment tool and finalize a plan to expand services to all GR Districts. These assessments will be conducted by licensed DMH staff.</p> <p>Medical Disability Assessment</p> <p>Subsequent to the Board's approval of this recommendation, the County Counsel for DHS determined that the medical disability assessments fall outside of the scope of the existing contracts with DHS' Public Private Partners (PPPs) and, thus, neither the medical disability assessments nor the comprehensive evaluations can be implemented through an amendment to current PPP contracts. A new solicitation process will be required. DPSS plans to utilize a solicitation process to select qualified contractors.</p> <p>Mental Health Disability Evaluation</p> <p>DMH will hire two Psychologists and a Psychiatric Social Worker II to provide comprehensive mental health evaluations for a selected group of GR participants pursuing SSI.</p> <p>Medical Disability Evaluation</p> <p>Currently, DHS contracts with JWCH Institute, Inc. for a demonstration project to improve SSI approval rates for eligible homeless individuals. Services include outreach, case management, comprehensive medical and mental health evaluations and documentation, and serving as a temporary medical home. The services under this contract have been in place since December 2009, and the Contractor has already demonstrated tremendous success in getting SSI applications approved in a short timeframe for the homeless population it serves. DHS and DPSS are reviewing the JWCH contract to determine if it can be amended to add comprehensive medical evaluations to GR participants pursuing SSI. The proposed</p>	

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
JUNE 30, 2010

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
		plan is contingent upon approval by County Counsel. If amending the JWCH contract is not a viable option, DPSS will complete a procurement process for the provision of comprehensive medical evaluations for a select group of GR participants pursuing SSI.	JULY 2010
9	DHS, DMH, and LASD to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI. Most of the costs will be funded with 50% new federal revenue.	<p>DPSS held several meetings with DMH, DHS and LASD to discuss the implementation plan for this project. Project protocols have been drafted and are in the clearance process.</p> <p>DHS has hired three Registered Nurses (RNs) and is in the process of hiring the remaining four. DMH has hired one RN and is in the process of identifying a second one. LASD has identified a RN who will work on this Project on an interim basis until LASD hires a permanent staff person.</p> <p>Project staff has been trained on Project protocols. DHS will train DMH and LASD RNs as soon as the hiring process is completed. The training is targeted for the last week of July 2010.</p> <p>County Counsels from the affected Departments have cleared the "Authorization/Consent" form.</p> <p>We expect to implement this project in July 2010.</p>	JULY 2010
10	Maximize the claiming of retroactive Medi-Cal for GR participants who qualify for SSI and Medi-Cal.	Preliminary teleconference meetings with DPSS, DMH, and DHS were held in June 2010 to further discuss the data needs for this project.	AUGUST 2010

Attachment

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
JUNE 30, 2010

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
11	<p>Integrate the Public Defender (PD) into SSI Advocacy, where GR participants are already clients of the Public Defender and advocacy can be combined with clients' representation in court.</p>	<p>Preliminary meetings took place in June 2010 with the Public Defender and internal partners to discuss the protocols of the pilot, such as: staffing, funding, and space. At the PD's request, the <u>Martinez v. Astriue</u> training material was provided to the PD on June 6, 2010.</p>	<p>AUGUST 2010</p>
12	<p>Modify the GROW Program to:</p> <ul style="list-style-type: none"> A. Customize services to individuals who are classified as: <ul style="list-style-type: none"> 1. Transitional Age Youth (TAY); 2. Veterans; and 3. Participants exiting Mandatory Substance Abuse Program (MSARP). 	<p>A.1 – The responsible workgroup met in May 2010. Los Angeles County Office of Education presented ideas for customizing services for the TAY population, which were accepted by the workgroup. A subsequent meeting will be scheduled during August 2010 to review proposed curriculum and other suggestions to develop resources for this project.</p> <p>A.2 – DPSS is exploring potential resources for this project.</p> <p>A workgroup meeting will be scheduled in July 2010 to discuss potential resources and other suggestions for this project.</p> <p>B & C – The first meeting of the responsible workgroup took place in June 2010. Some potential resources have been identified through collaboration with the Department of Rehabilitation.</p> <p>A follow-up meeting was held in June 2010 to discuss suggestions for the development of this project.</p>	<p>NOVEMBER 2010</p> <p>D - Preliminary meetings with DCFS and Probation Department took place in April 2010, with informal exchange of service information, resources and other ideas to be considered for this project.</p> <p>A meeting with the responsible workgroup will be scheduled in</p>

Attachment

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
JUNE 30, 2010

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
	<p>E. Develop a comprehensive and ongoing evaluation plan of GROW to track outcomes for GR participants, including, but not limited to, education and training outcomes, length of employment obtained through GROW, and recidivism.</p>	<p>July 2010. The purpose of the meeting is to determine protocols for this collaboration and identify liaisons to assist with the referral process.</p>	
13	<p>Establish collaboration between DPSS and the Probation Department to reduce the number of Emerging Adults (age 18-24) applying for GR benefits.</p>	<p>DPSS has established collaboration with DCFS and Probation Department to facilitate referrals to GROW services, including American Recovery and Reinvestment Act (ARRA) Projects. DPSS has designated a liaison to work with both departments on this effort.</p>	<p>COMPLETED MAY 2010</p>
14	<p>Pursue federal reimbursement through FSET, at a rate of 50%, for mental health, domestic violence, and, to the extent possible, substance abuse services provided to GROW participants.</p>	<p>This project was completed in May 2010.</p>	
15		<p>The DPSS plan that was submitted to the State was approved on May 5, 2010. Reimbursement through FSET for costs associated with support services to GROW participants can be claimed effective October 2010.</p>	<p>COMPLETED MAY 2010</p>
16	<p>Expand GROW to include GED preparation.</p>	<p>This project was completed in May 2010.</p>	

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
JUNE 30, 2010

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
		DPSS is finalizing policy/procedures to implement a GED component for GROW participants who lack a high school diploma. A list of available education entities has been identified. Programmatic changes to MAPPER have been completed.	
	Conduct a comprehensive study of the Mandatory Substance Abuse and Recovery Program (MSARP) to evaluate its effectiveness.	CEO-SIB staff has shared a draft report, which is currently under review by DPSS.	JULY 2010
17	A. DPSS and DPH-ADPA will evaluate the redesign of MSARP based upon the results of the evaluation. B. Use the evaluation outcomes and DPH-ADPA Rate Study to inform a resolicitation process for GR services. C. Evaluate the need for substance abuse treatment services for emerging adults ages 18-24 and the need to design specialized treatment services for this population.		
18	Develop State and federal legislative/regulatory proposals to assist indigent adults and/or mitigate County costs and work with stakeholders to develop these proposals.	DPSS is examining possible areas where legislative and regulatory changes may be necessary and feasible. The initial responsible workgroup meeting will be convened in July 2010.	DECEMBER 2010
19	DPSS to expand data collection for the GR Program.	A meeting to discuss data collection and computer programming for all SSI Advocacy-related recommendations was held on June 22, 2010.	Ongoing
20	Include the GR Program in the County's and DPSS' strategic plans.	The GR Program has been incorporated in the County's and DPSS' Strategic Plan.	COMPLETED APRIL 2010
21	Conduct a pilot having the current Linkages GAIN Services Workers at two or three small DCFS offices work with the Children's Social Workers to utilize the Transition Conference as an opportunity to connect foster youth with County services.	The responsible workgroup for this recommendation will convene in July 2010.	AUGUST 2010
22	Provide better screening for Veterans and better referrals for	An initial meeting was held in June 2010 with Legal Aid Foundation of Los Angeles (LAFLA), Public Counsel, and	SEPTEMBER 2010

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
JUNE 30, 2010

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
	assistance with claims and strengthen DPSS case management for Veterans who are on GR to enable them to qualify faster for Veteran's benefits and services.	<p>Department of Military and Veterans Affairs (DMVA).</p> <p>Project protocols for the DPSS/LAFLA pilot have been drafted and shared with the responsible workgroup. Comments are due from the workgroup by the end of June 2010. The Metro East District Office has been identified as the pilot site. DPSS is currently identifying space for LAFLA and DMVA staff to be co-located at the District and is in the process of identifying a liaison to work with LAFLA and DMVA on this pilot.</p> <p>Currently working with Public Counsel to develop a resource guide for Veteran participants.</p>	AUGUST 2010
23	Assess and enhance the current mechanisms designed to enable former foster care youth, medically indigent under 21 and probation youth to receive and retain Medi-Cal.	<p>An internal meeting was held on May 25, 2010 to discuss current DPSS efforts on this subject.</p> <p>Children in foster care automatically continue on Medi-Cal until they reach age 21; however, 50% of cases are terminated at redetermination for failure to respond. There is State legislation currently pending to automatically extend Medi-Cal benefits to age 21.</p>	<p>DPSS is currently taking Medi-Cal applications at probation camps only for minor consent services (Medi-Cal for individuals who need continuous services; e.g., pregnancy, mental health treatment, counseling, drug and alcohol abuse). DPSS is working with Probation on an automated listing of youth who are within 90 days of being released from the Probation system. Interface with Probation will be ready in July 2010. Draft protocols are being developed.</p> <p>A meeting with the responsible workgroup is tentatively scheduled for July 2010.</p>

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
JUNE 30, 2010

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
24	Increase the GR Participants resources by: <ul style="list-style-type: none"> A. Allowing GR recipients to remain on GR while saving more money. Permit GR participants to maintain a Restricted Savings Account up to a pre-determined amount for the purpose of saving for housing, education or training expenses, and/or to start a business that would not be countable towards the property limit. B. Helping participants who have child support obligations by: <ol style="list-style-type: none"> 1. Educating workers and participants about the assistance DPSS currently offers to help lower child support payments for participants. 2. Work with the Child Support Services Department to reduce child support payments for participants after they leave GR for the first six months they have a job, to allow them to get on their feet before resuming higher child support payments. 	A - DPSS is currently reviewing policy on permitting restricted savings accounts for GR participants. B.1 - Draft protocols will be developed to educate DPSS staff on assisting GR participants with lowering their child support payments. B.2 - A meeting with the Child Support Services Department has been tentatively scheduled for July 2010. The purpose of the meeting is to discuss the feasibility of reducing child support payments for participants for six months after they leave GR due to employment.	OCTOBER 2010
25	Add positions in GR offices, through September 30, 2010, utilizing TANF emergency contingency funds (ECF), to assist GR participants navigate the GR process. Positions may be filled with GR non-custodial parents (NCPs) who qualify for ECF-funded subsidized employment.	This project was completed with the hiring of six participants who are currently working as Customer Services Assistants (CSAs) in the GR Districts lobby. In addition, there are four more candidates who are pending the results of their live scans for placement in a GR District lobby.	COMPLETED MAY 2010
26	CEO-SIB to conduct an evaluation of GR Program mandates, rules, time limits, sanctions, operational processes, and data limitations, including a cost/benefit analysis.	A kick-off meeting took place on June 9, 2010, with the CEO, DPSS and the research contractors. During the meeting, copies of the Qualitative and Quantitative contracts were provided. The goals of the study were discussed. Four focus groups will be formed with GR participants and there will also be focus groups with Eligibility Workers and Administrative staff. An action plan is being developed for the GR evaluation.	AUGUST 2010

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NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
27	Establish a GR Anti-Homelessness Account in the CEO's budget to fund enhanced services to reduce GR homelessness. Fund this account with savings from enhanced GR services, including but not limited to GR grant savings for participants who receive a rental subsidy and secure employment/SSI, and Interim Assistance Reimbursement for rental subsidies for GR participants who qualify for SSI.	DPSS is currently working with the CEO to establish the GR Anti-Homelessness Account.	JULY 2010
28	Assist GR participants manage their money better by: <ul style="list-style-type: none"> ▪ Formulating a list of banks that allow recipients to establish accounts with no minimum balances and minimal overdraft fees. ▪ Assembling training materials instructing clients about budgeting and money management as well as the security advantages of keeping their funds in a bank account. The instruction topics would also include balancing their check book, if utilizing an ATM to check their account status, and avoiding bank fees. ▪ Focusing on providing this information to GR participants securing SSI benefits. ▪ Engaging with community organizations involved with assisting individuals with money management issues. ▪ Seeking volunteer agencies who will offer training or assistance to GR participants on money management. 	DPSS has identified banks that accept EBT cards without surcharges. This listing will be used to assist in the development of this project. The initial meeting of the responsible workgroup is scheduled for July 2010.	JANUARY 2011
29	Do not limit the housing subsidy to 9 months for employable GR participants. Instead, permit employable GR participants who reach the 9-month time limit to continue receiving the subsidy during the 3 months that they are ineligible to GR.	A meeting will be scheduled in July 2010 to discuss the implementation plan for this project, specifically changes to the LEADER system to allow the continuation of the housing subsidy during the three months that employable GR participants are ineligible to GR due to time limits.	SEPTEMBER 2010
30	DPSS should engage in a dialogue with board and care operators to determine how to increase usage of board and care facilities by homeless GR participants. Explore providing information to GR participants on board and care facilities upon release from emergency rooms or hospitals.	A meeting with two Board and Care agencies to discuss other housing options for homeless GR participants took place on June 23, 2010. A second meeting will be scheduled in July to discuss ideas to increase utilization of Board and Care facilities by homeless	AUGUST 2010

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
JUNE 30, 2010

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
31	<p>Improve upon DPSS' GR SSI and Medi-Cal Advocacy Program by:</p> <ol style="list-style-type: none"> Advocating for a change in federal regulations that would extend the protected filing date from 60 days to as many as 365 days, to increase the period of time during which the County could secure Interim Assistance Reimbursement for GR grants/rental subsidies and retroactive Medi-Cal. Customizing the approach to securing SSI based on the condition and available documentation for individual GR participants by: <ul style="list-style-type: none"> Better identifying GR participants who are potentially eligible for SSI through a more extensive medical and/or mental health disability assessment (approved in Phase One). Evaluating available medical treatment documentation and utilizing the document retrieval process (approved in Phase One), if necessary. Evaluating whether a comprehensive medical/mental health evaluation (approved in Phase One), and the resulting write-up would strengthen the SSI application, and, if so, refer the participant for an evaluation. Making an appropriate decision about when to file the SSI application in order to increase the chance of approval, based on the participant's situation and the results of any assessments, medical documentation, and/or evaluation. Implementing the SSI/SSDI Outreach Access and Recovery (SOAR) principles and strategies. 	<p>GR participants</p> <ol style="list-style-type: none"> Preliminary discussions have taken place with the local Social Security Administration regarding the protected filing date. A meeting will be scheduled for further discussions in July 2010. The current focus of this effort is a potential operational change at the local level, rather than a federal regulatory change. A preliminary meeting with an internal DPSS focus group, comprised of DPSS SSI Advocates, was held on June 23, 2010, to discuss different ways of implementing these recommendations. <p>A subsequent meeting with the responsible workgroup was held on June 24, 2010 to discuss the project's course of action.</p>	<p>DECEMBER 2010</p> <p>AUGUST 2010</p> <p>SEPTEMBER 2010</p> <p>3. SOAR training will be conducted by Mental Health Advocates, Inc. and is tentatively scheduled to take place in</p>

Attachment

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
JUNE 30, 2010

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
	<p>4. Seeking training from Social Security Administration for DPSS SSI advocates on SSI medical disability standards and case development.</p> <p>5. Developing the disability assessment and evaluation tools in consultation with medical/mental health professionals and experienced SSI advocates.</p>	<p>July, August and September 2010.</p> <p>4. SSA Committed to provide training to DPSS staff. Future meetings with SSA will be held to finalize the training schedule.</p> <p>5. The mental health disability assessment tool has been developed. A pilot will be implemented in two to three designated areas in an effort to test the revised tool. At the conclusion of the short-term pilot, it is our intent to expand services to all GR Districts as soon as possible.</p>	<p>AUGUST 2010</p> <p>DECEMBER 2010</p>
32	<p>Provide ancillary expenses for showers, shoes, clothes, etc., for those pursuing SSI, including a motel voucher for the night before an SSI appointment with California Department of Social Services or Social Security Administration, when needed to enable the participant to arrive on time.</p>	<p>A preliminary meeting with an internal DPSS focus group comprised of DPSS SSI Advocates to discuss the different ways of implementing the recommendation was held on June 23, 2010. The responsible workgroup meeting with all partners to discuss the project's course of action was held on June 24, 2010.</p>	<p>JULY 2010</p>
33	<p>Collaborate with private medical facilities to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI as part of the current DPSS-DHS homeless release project.</p>	<p>A meeting with Hollywood Presbyterian and White Memorial hospitals will be scheduled in August 2010 to discuss the feasibility of retrieving medical records on behalf of GR participants.</p>	<p>JANUARY 2011</p>

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
JUNE 30, 2010

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
34	<ul style="list-style-type: none"> ▪ Assist GR participants applying for SSI benefits by: <ul style="list-style-type: none"> ▪ Identifying GR participants who are in need of mental health treatment to secure medical documentation needed to secure SSI; ▪ Subject to funding, providing mental health treatment to those participants; ▪ Prioritizing mental health services for GR participants who need to pursue SSI; ▪ Documenting those who cannot be treated due to lack of funding; ▪ Ensuring cost recoupment from retroactive Medi-Cal; ▪ Assessing current procedures for providing mental health treatment to GR participants; and ▪ Recommending changes to better keep participants engaged in treatment. 	<p>The first meeting with the responsible workgroup to discuss the protocols for this project was held on June 23, 2010.</p>	SEPTEMBER 2010
35	<p>DPS/S SSI Advocates should provide case management that will help GR SSI applicants keep track of appointments.</p>	<p>A preliminary meeting with an internal DPSS focus group comprised of DPS/S SSI Advocates was held on June 23, 2010, to discuss different ways of implementing the recommendation. The responsible workgroup meeting with all partners to discuss the project's course of action was held on June 24, 2010.</p>	AUGUST 2010
36	<p>Pursue a pilot to coordinate ongoing health and mental health treatment for GR participants pursuing SSI, dependent upon available funding.</p>	<p>The first meeting with the responsible workgroup to discuss the protocols for this project was held on June 23, 2010.</p>	DECEMBER 2010
37	<p>Strengthen current process to identify GR participants who were previously on SSI and prioritize SSI advocacy for them.</p>	<p>A preliminary meeting with an internal DPSS focus group comprised of DPS/S SSI Advocates was held on June 23, 2010, to discuss different ways of implementing the recommendation. The responsible workgroup meeting with all partners to discuss the project's course of action was held on June 24, 2010.</p>	AUGUST 2010

Attachment

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
JUNE 30, 2010

No.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE								
38	<p>Establish the following targets for SSI Approvals:</p> <ol style="list-style-type: none"> For SSI applications filed in FY 10/11 and ongoing, increase the SSI approval rate at the initial application level to at least 50% in FY 10/11, to at least 60% in FY 11/12, and to at least 70% in FY 12/13. For the overall number of SSI approvals, increase the number of SSI approvals as follows: <table border="1" data-bbox="584 1265 796 1855"> <thead> <tr> <th>FY 2008-09 Baseline</th> <th>FY 2010-11 Target</th> <th>FY 2011-12 Target</th> <th>FY 2012-13 Target</th> </tr> </thead> <tbody> <tr> <td>5891</td> <td>6400</td> <td>6900</td> <td>7400</td> </tr> </tbody> </table>	FY 2008-09 Baseline	FY 2010-11 Target	FY 2011-12 Target	FY 2012-13 Target	5891	6400	6900	7400	<p>The workgroup meeting to discuss different ways of accomplishing the targets for SSI approvals was held on June 24, 2010.</p>	JUNE 2011 and ongoing
FY 2008-09 Baseline	FY 2010-11 Target	FY 2011-12 Target	FY 2012-13 Target								
5891	6400	6900	7400								
39	Address/fix non-disability related SSI eligibility issues such as citizenship documentation, birth certificate, etc.	The responsible workgroup meeting with all partners was held on June 24, 2010.	AUGUST 2010								
40	Strengthen existing relationships with the Social Security Administration.	<p>An upper level management meeting with the Social Security Administration, Veterans Administration, CEO and various County Departments was held on June 22, 2010. The purpose of the meeting was to stress the importance of collaboration among departments for the successful implementation of the GR Restructuring projects.</p>	Ongoing								
41	<p>Implement a transportation pilot project to evaluate the impact of providing monthly bus passes to two groups of GR participants to determine whether providing bus passes (instead of individual tokens) increases their likelihood of approval for SSI:</p> <ol style="list-style-type: none"> GR participants pursuing SSI, and GR participants receiving a housing subsidy and pursuing SSI. 	<p>A follow-up meeting will be scheduled for July 2010.</p>	AUGUST 2010								

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
JUNE 30, 2010

No.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
	The pilot will consist of 200 GR participants. Each participant will contribute \$10 per month toward the cost of the bus pass. Results will be compared after one year of the pilot. If providing bus passes is shown to be a good method of helping participants obtain approval of SSI benefits more quickly, DPSS will then explore ways of providing them to more participants.		
42	<p>Reconstitute the GR Restructuring Workgroup as the GR Restructuring Steering Committee to meet quarterly to do the following:</p> <ul style="list-style-type: none"> ▪ Work together on the implementation process; ▪ Review evaluation data and make recommendations for any adjustments to processes or targets; and ▪ Identify and pursue opportunities for GR service integration. 	<p>All GR Restructuring Workgroup members were invited to be part of the specific workgroups for the individual recommendations.</p> <p>The first quarterly meeting of the GR Restructuring Steering Committee is targeted for July 2010.</p>	JULY 2010



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WILLIAM T FUJIOKA
Chief Executive Officer

November 5, 2010

Board of Supervisors
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First District

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Third District

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Fifth District

TO: Supervisor Gloria Molina, Chair
Supervisor Mark Ridley-Thomas
Supervisor Zev Yaroslavsky
Supervisor Don Knabe
Supervisor Michael D. Antonovich

FROM: William T Fujioka
Chief Executive Officer

GENERAL RELIEF RESTRUCTURING PLAN: QUARTERLY UPDATE

This is to provide a report on the progress of the implementation of the General Relief (GR) Restructuring Plan (RP).

On April 24, 2009, on a motion by Supervisor Knabe, your Board instructed the Chief Executive Officer (CEO), in collaboration with the Department of Public Social Services (DPSS), and consultation with County Counsel, to design a potential GR program that will better assist GR participants, with the expectation that more of these individuals would be able to transition off of County assistance. In response, the GR Restructuring Workgroup (RW), consisting of 11 County departments and ten stakeholders, was convened. On February 9, 2010, your Board approved the comprehensive plan to restructure the GR program. This plan consisted of 42 recommendations designed to reduce the GR caseload over time by focusing services on housing assistance, Supplemental Security Income (SSI) advocacy, and employment preparation.

The GR RW members were invited to participate in various workgroups that were convened by DPSS to assist in the implementation of the plan. Several internal DPSS meetings, and meetings with other County departments and community stakeholders, have taken place to discuss the implementation of the various GR restructuring projects. As a result of the great support and collaboration from the different partners, 13 GR Restructuring Recommendations have already been implemented and we anticipate that eight more will be implemented in October 2010. The attached Chart provides the status of all 42 approved RW recommendations.

"To Enrich Lives Through Effective And Caring Service"

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November 5, 2010
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Approved Workgroup Recommendations That Have Been Implemented

As reported in the Quarterly Report, dated July 2, 2010, the following four recommendations were implemented:

- Recommendation No. 13, collaboration with Department of Children and Family Services (DCFS) and the Probation Department to connect youth to existing American Recovery and Reinvestment Act (ARRA) funded projects: DPSS has established collaboration with DCFS and Probation Department to facilitate referrals to General Relief Opportunities for Work (GROW) services, including ARRA funded services. DPSS has designated a liaison to work with both departments on this effort. Additionally, the GROW program has been assisting several individuals who emerged from foster care and needed assistance with various issues. Some were referred to the district offices to apply for CalWORKs, GR, or other benefits. Qualifying participants were referred to the WorkSource Centers for assistance with subsidized employment and/or housing as needed. Approximately 50 individuals have received services/referrals under this project. A more formal/structured process is being developed according to Recommendations No. 12 and 21.
- Recommendation No. 14, pursuit of federal reimbursement through Food Stamp Employment and Training (FSET) for reimbursement for supportive services to GROW participants: The State approved DPSS' FSET plan; therefore, reimbursement through FSET for costs associated with support services to GROW participants can be claimed effective October 2009. During Fiscal Year (FY) 2009-10, DPSS claimed \$1,388,390 for GROW Mental Health services, of which \$694,195 is from federal revenue.
- Recommendation No. 20, GR program has been incorporated in the County's and DPSS' Strategic Plan (SP).

Strategy 3 of the County's SP includes Objectives 2 and 3 related to the GR program:

Objective 2: GR to SSI: By June 30, 2010, assess the success of the implementation of the GR to SSI project working with DPSS, departments of Health Services (DHS), Mental Health (DMH), and Public Health (DPH) staff. Based upon the evaluation, determine whether to continue program and/or integrate with GR Efficiencies Initiative. As of September 30, 2010, there are 497 GR participants approved for SSI benefits through the GR to SSI project. This far exceeds the original goal number of 200 approvals. DPSS continues to monitor pending applications and expects more approvals in future months.

Objective 3: By June 30, 2010, to achieve GR Efficiencies, develop recommendations with stakeholders, present plan to the Board of Supervisors, and begin project implementation. A Workgroup composed of 11 County departments and 10 stakeholders was formed and multiple meetings were convened to discuss a GR RP. A 42 recommendation RP was agreed upon by the RW and approved by the Board of Supervisors on February 9, 2010. As of September 30, 2010, 13 of the 42 approved recommendations have been implemented and we anticipate that eight more will be implemented in October 2010.

Goal I, Program Excellence of the DPSS' SP included Objective 1.1.7 related to the GR program. By June 2010, redesign the GR program to reduce homelessness, increase the number of customers who transition to SSI, and increase the number of customers who become employed.

- Recommendation No. 25, addition of positions utilizing ARRA to assist participants through the GR process: Six participants worked as Customer Services Assistants in the GR district lobbies until September 30, 2010, when the available funding ended.

In addition to the four Recommendations implemented and reported in the previous Quarterly Report, dated July 2, 2010, the following nine Recommendations were implemented between July 2010 and September 2010:

- Recommendation No. 5, expansion of the Housing Subsidy Project (HSP) offers a rental subsidy for GR participants to provide the stability needed to find and maintain a job or secure SSI benefits. The expansion of the GR HSP and Case Management Project was implemented on August 2, 2010. This project offers a rental subsidy of \$400 to homeless GR participants pursuing employment or SSI/Veterans benefits. An additional 640 subsidy slots are now available. The slots will increase over time as funding becomes available through the GR Anti-homelessness Account (AHA).
- Recommendation No. 9, collaboration with DHS, DMH, and the Los Angeles County Sheriffs' Department (LASD) to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI. The project was implemented in August 2010. Project protocols were released and SSI Advocacy staffs were trained. A comprehensive training for Registered Nurses (RNs) was conducted on August 13, 2010. DHS and LASD are now processing pre-clearance requests and retrieving medical and mental health records. DMH is in the process of hiring both of its RNs.

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- Recommendation No. 10, collaboration with DMH and DHS to maximize the claiming of retroactive Medi-Cal for GR participants who qualify for SSI. A monthly activity list is being transmitted to DMH and DHS on a monthly basis. This list is a key factor in allowing DMH and DHS to significantly improve their retroactive Medi-Cal claims processing efforts for GR participants who were recently approved for SSI. The first list was forwarded to DMH and DHS in September 2010.
- Recommendation No. 16, expand GROW to include General Education Development preparation for GROW participants who lack a high school diploma. A list of available education entities has been identified and made accessible to Case Managers who share this information with GR Participants.
- Recommendation No. 19, expand data collection for the GR program and determine its needs. DPSS Systematic Measurement, Accountability, and Reporting Tool (DPSSSMART) have expanded data collection efforts. DPSS has evaluated its need for additional GR program data and has initiated the following:
 - Identified key GR program data that will be accessible to all DPSS staff through DPSSSMART;
 - Developed an internal SSI and Medi-Cal Advocacy Program (SSIMAP) database to track all SSI advocacy data related to GR restructuring;
 - Developed a mechanism to track all GR restructuring project data; and
 - Expanding GR data collection is an ongoing effort that will be enhanced as the Department identifies additional data needs.
- Recommendation No. 27, establish a GR AHA in the CEO's budget to fund enhanced services to reduce GR homelessness. This account will be funded with savings from enhanced GR services, including but not limited to GR grant savings for participants who receive a rental subsidy and secure employment/SSI, and Interim Assistance Reimbursement for rental subsidies for GR participants who qualify for SSI. The AHA was set up in the DPSS Assistance budget in September 2010.
- Recommendation No. 38, establish targets for: 1) SSI approvals filed in FY 2010-11 and ongoing; and 2) the overall number of SSI approvals. SSI approval targets have been established and communicated to staff. These targets were recently reiterated in the SSIMAP newsletter and at the SSI Advocate Quarterly Meeting. SSI approvals are tracked on a monthly basis.

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- Recommendation No. 40, strengthen existing relationships with the Social Security Administration (SSA). In addition to the June 22, 2010, upper level management meeting with the SSA, Veterans Administration, CEO, and various County Departments, a second meeting attended by DPSS, SSA, and Disability Determination Services Division staff was held on August 12, 2010, to strategize ways of helping more GR participants' transition to SSI. The three agencies committed to collaborate with each other to meet their objective of increasing the number of SSI approvals among GR participants. Agencies agreed to meet quarterly to discuss progress made.
- Recommendation No. 42, hold quarterly meetings of the GR Restructuring Steering Committee (RSC): The GR RSC held its first quarterly meeting in July 2010. The next meeting will be held in October 2010.

An update on all 42 GR restructuring projects is provided on the attached GR Restructuring Master Implementation Chart.

We will provide the next quarterly report in January 2011.

Please let me know if you have any questions, or your staff may contact Kathy House at (213) 974-4530, or via email at khouse@ceo.lacounty.gov.

WTF:AJ:KH
DS:JAB:cvb

Attachment

c: County Counsel
Executive Office, Board of Supervisors
Public Social Services

Memo to BOS – GR Restructuring Quarterly Report.doc

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
SEPTEMBER 30, 2010

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
1	Subject to applicable confidentiality requirements, use the Adult Linkages Project mechanism to identify the County service history of GR applicants/participants, so that applicants/participants can be offered services that take into account the totality of their individual circumstances.	The Chief Executive Office (CEO) approved funding for the one-time cost implementation of this recommendation. CEO-SIB is currently working with SAS (contractor), DPSS, and County Counsel to develop the system that will be used by DPSS eligibility staff to access real time service utilization records for GR applicants/participants.	FEBRUARY 2011
2	The County should develop an innovative service integration model that can support County departments, other governmental entities, and community partners in concurrently serving a shared clientele.	The meeting intended for July 2010 did not take place; it will be rescheduled at the beginning of October 2010. Research is still pending on this project.	FEBRUARY 2011
3	Increase integration of services between the Sheriff's Department and DPSS by: <ul style="list-style-type: none"> A. Developing a plan to enhance the current County jail match to identify individuals who are incarcerated and have a linkage to GR benefits, to provide pre- and post-release services and SSI Advocacy that will assist with their re-entry into society. B. Assessing the DPSS/Sheriff's Homeless Release Project to determine its effectiveness. C. Implementing a review protocol to determine whether any outstanding warrants remaining on the GR/SSI applicant's record should be cleared, recalled or withdrawn. D. Ensuring that probation, parole, and other warrants that should have been satisfied by a GR/SSI applicant's stay in jail have been withdrawn or recalled. E. Appointing a liaison for individuals with outstanding warrants whom advocates and County employees can contact directly to: (1) inquire about the underlying reason and validity of a warrant and (2) assist the SSI advocate in "clearing up" the warrant. F. Referring disabled individuals exiting jail who apply for GR to a SSI advocate/liaison, in order to re-establish SSI benefits and work with agencies (i.e., probation, parole, public defender, courts, etc.) to recall existing warrants. G. Referring disabled individuals exiting jail who do not have 	A meeting was held on July 7, 2010 with the designated workgroup, which includes DPSS, Sheriff, Public Defender and a representative from the Public Social Services (PSS) Commission. The Department of Public Social Services (DPSS) presented an overview of the current Jail Match and enhancements were recommended. Additionally, an overview of the DPSS/Sheriff Homeless Project was presented.	Los Angeles Sheriff Department (LASD) indicated that outstanding warrants are resolved prior to an inmate being released from jail. However, due to the huge number of inmates, some are not properly cleared through the system prior to being released. LASD agreed to work on a system to ensure that all inmates being identified for this project are cleared through their system to ensure that warrants are resolved prior to releasing inmates. A second meeting was held on September 9, 2010. DPSS and LASD are working to identify additional data fields for the jail match listing to ensure more matches are made when the listing is run. The workgroup also discussed ways to clear warrants for potentially SSI eligible inmates who have prior GR history. A Custody Assistant candidate has been identified to be a liaison between staff and the LASD to help clear warrants for potentially Supplemental Security Income (SSI) eligible

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
SEPTEMBER 30, 2010

NO	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
4	<p>SSI benefits to GR SSIMAP for benefits establishment.</p> <p>Encourage police agencies to make social services referrals for the homeless and connect them with resources, rather than issuing citations.</p>	<p>Inmates who have prior General Relief (GR) history.</p> <p>A meeting was held on June 17, 2010 with the Long Beach Police Department, L.A. County Sheriff's Department and Community partners.</p> <p>The Long Beach Police Department and LASD provided an overview of their services to the homeless population.</p> <p>DPSS will work with the police agencies to create a simple informational document in multiple languages to distribute to the homeless and connect them to services. LASD has agreed to draft the informational document.</p>	<p>NOVEMBER 2010</p>
5	<p>Enhance Subsidized Housing by:</p> <ul style="list-style-type: none"> A. Increasing the total number of housing subsidies to 10,000 by December 2014. B. Increasing the number of housing subsidies for homeless disabled GR participants pursuing, or willing to pursue, SSI and/or veterans benefits, so that 100% of homeless disabled GR participants pursuing SSI and/or veterans benefits are offered a housing subsidy within 5 years. C. Increasing the number of housing subsidies for homeless, employable GR participants. 	<p>The following key points were implemented in the Administrative Directive which was released to Project staff on August 2, 2010, for instructions and procedures:</p> <p>A. The GR Housing Subsidy Pilot has been expanded to include an additional 640 housing subsidy slots, bringing the total slots from 900 to 1,540. The current implementation plan projects to increase the housing subsidies based on the savings generated by GR participants who receive a housing subsidy and exit GR with work or disability benefits.</p> <p>B. & C. The new 640 housing subsidies added to the Pilot were allocated as follows: 320 for GR employable participants and 320 for GR disabled participants pursuing SSI and/or veterans benefits.</p>	<p>IMPLEMENTED AUGUST 2010</p>

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
SEPTEMBER 30, 2010

NO	APPROVED RECOMMENDATIONS	TARGET IMPLEMENTATION DATE
NO	APPROVED RECOMMENDATIONS	STATUS
D	As in the current GR Housing and Case Management Project.	D. Incorporated in the implementation Administrative Directive.
E	Subsidized housing itself should not be time-limited, allowing people to stay as permanent residents, after they start receiving outside income and can pay for their housing.	E. The GR Housing Subsidy amount was increased from \$300 to \$400 and the participant's contribution from the grant was reduced from \$136 to \$100. The new total amount available is \$500.
F	Increasing the GR rental subsidy amount from \$300 to \$400 and reducing the participant's contribution from the grant from \$136 to \$100, so the total amount available for rent will be \$500.	F. & G. DPSS is internally working and has established procedures to pursue federal reimbursement for housing subsidy payments made to employable GR participants through the FSET fund and to pursue reimbursement for housing subsidy payments made to GR participants who are approved for SSI through the IAR process. The money recouped from SSI will be reinvested in additional housing subsidies.
G	Pursuing federal reimbursements for housing subsidy payments made to employable GR participants through the Food Stamp and Employment Training (FSET) fund at a rate of 50%, and pursuing reimbursement for housing subsidy payment made to GR participants who are approved for SSI through the Interim Assistance Reimbursement Program, at a rate of 100%.	H. Reinvesting the money recouped from SSI (Interim Assistance Reimbursement for housing subsidies) in additional housing subsidies.
H	Reinvesting the money recouped from SSI (Interim Assistance Reimbursement for housing subsidies) in additional housing subsidies.	H. Two training sessions were conducted on July 15, 2010 to provide Project Staff, eligibility staff both intake and approved, GROW Case Managers and SSI Advocates with the new procedures on the expansion of the Housing Subsidy Pilot Program.
I	Implement a pilot project (subject to a cost benefit analysis) by master leasing and/or purchasing foreclosed apartment	August 2, 2010, The final approved Administrative Directive was released and the expansion of the Housing Subsidy Pilot Program was implemented.
6	The meeting intended for July 2010 did not take place; it will be rescheduled in October 2010. Research is still pending on this	JANUARY 2011

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
SEPTEMBER 30, 2010

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
	buildings and/or multi-family housing units and/or dorm-like housing to be provided for the indigent homeless population. This housing should be owned and/or operated by a non-profit housing developer and/or homeless service provider with expertise in managing housing with services.	project	
7	Address supportive housing needs by:	<p>A. Exploring housing options for mentally ill participants through City and County Housing Authorities and other smaller Housing Authorities throughout LA County.</p> <p>B. Identifying and leveraging County funding for housing resources and related services that already receive county funding or support.</p>	<p>A. DMH and DPSS staff held a pre-meet on April 27, 2010, to discuss possible housing experts and providers to be invited to assist with the implementation on this effort. A list of potential collaborative agencies was developed. The responsible workgroup met on June 24, 2010, to discuss the implementation plan for this project</p> <p>A second workgroup meeting was held on August 4, 2010. A presentation on the Mental Health Services Act (MHSA) was made by Department of Mental Health (DMH) staff. Additionally, Los Angeles Homeless Services Authority (LAHSA) staff made a presentation on Project 50. MHSA, A Community of Friends and some local missions were identified as agencies that offer potential housing options to mentally ill GR participants who meet their criteria.</p> <p>B. Additionally, the group discussed the most viable projects and funding, which currently have housing slots available. All of the projects identified have limited funding. However, A Community of Friends, which is funded by the Community Development Commission (CDC) will be further explored.</p> <p>Project on target for implementation.</p>
8		Subject to detailed operational and fiscal planning during Phase Two of the GR Restructuring process, eliminate the current cursory employability/NSA screening and replace it with a more extensive medical/mental health disability assessment performed by (1) DMH, (2) DHS or possibly DPH, and/or (3) DHS Public Private Partners (PPPs). For permanently disabled participants in need of additional documentation to support their SSI applications, a comprehensive medical/mental health evaluation would be	<p>Meetings were held with DMH and DHS regarding the implementation of the Disability Assessments/Comprehensive Evaluations.</p> <p><u>Mental Health Disability Assessment</u></p> <p>A draft of the mental health disability assessment tool was developed and it is being tested in the DPSS Metro Special District Office. At the conclusion of the short-term pilot, DPSS</p>

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
SEPTEMBER 30, 2010

NO	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
	<p>performed. The extensive assessments and the comprehensive medical and mental health evaluations and write-ups will be funded with 50 - 75% new federal revenue.</p>	<p>will evaluate the assessment tool and finalize a plan to expand services to all GR Districts. These assessments will be conducted by licensed DMH staff.</p> <p>DPSS and DMH developed an implementation plan to begin providing the enhanced mental health disability assessment. Implementation will be staggered and the new DMH Psychiatric Social Workers will be phased-in beginning October 2010.</p> <p><u>Medical Disability Assessment</u></p> <p>Subsequent to the Board's approval of this recommendation, the County Counsel for DHS determined that the medical disability assessments fall outside of the scope of the existing contracts with DHS' Public Private Partners (PPPs) and, thus, neither the medical disability assessments nor the comprehensive evaluations can be implemented through an amendment to current PPP contracts.</p>	DECEMBER 2010

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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NO	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
9	DHS, DMH, and LASD to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI. Most of the costs will be funded with 50% new federal revenue.	<p>Project protocols were released and SSI Advocacy staff trained. DPSS continues to meet with DMH, DHS and LASD to clarify issues, exchange best practices and measure the progress made.</p> <p>DHS has finalized hiring all seven Registered Nurses (RNs). DMH is in the process of hiring both of its RNs. The RN previously reported as hired did not take place. LASD has identified one RN who will work in this project on an interim basis until LASD hires a permanent staff person.</p> <p>A comprehensive training for RNs was conducted on August 13, 2010. Training presenters included staff from SSA, DDSD and DHS.</p> <p>The project was implemented in August 2010.</p> <p>DHS and LASD are now processing pre-clearance requests and retrieving medical and mental health records. DMH does not have the staff yet for this program.</p>	IMPLEMENTED AUGUST 2010
10	Maximize the claiming of retroactive Medi-Cal for GR participants who qualify for SSI and Medi-Cal.	<p>Preliminary teleconference meetings with DPSS, DMH, and DHS were held in June 2010 to further discuss the data needs for this project.</p> <p>A listing of GR participants who were approved for Supplemental Security Income (SSI) will be transmitted to DMH and DHS on a monthly basis. The first report was forwarded to DMH and DHS in September 2010. This list is a key factor in allowing them to significantly improve their retroactive Medi-Cal claims processing efforts for GR participants who were recently approved for SSI.</p>	IMPLEMENTED SEPTEMBER 2010

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
SEPTEMBER 30, 2010

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
11	<p>Integrate the Public Defender (PD) into SSI Advocacy, where GR participants are already clients of the Public Defender and advocacy can be combined with clients' representation in court.</p>	<p>PD identified the Compton Courthouse as the location for this project. Staff has been selected. One DPSS SSI Advocate and one PD Psychiatric Social Worker II will be collocated at the PD site to provide SSI Advocacy services. We are in the process of finalizing the MOU, project protocols and funding for site preparation and equipment.</p>	OCTOBER 2010
12	<p>Modify the GROW Program to:</p> <ul style="list-style-type: none"> A. Customize services to individuals who are classified as: <ol style="list-style-type: none"> 1. Transitional Age Youth (TAY); 2. Veterans; and 3. Participants exiting Mandatory Substance Abuse Program (MSARP). 	<p>NOVEMBER 2010</p> <p>A.1. The implementation plan for this project is being finalized by the workgroup. Items that need to be finalized include GROW Computer Programming changes; curriculum for specialized job club class by LACOE; instructions to staff. Target implementation date is November 2010.</p> <p>A.2. The implementation plan for this project is being finalized. Items that need to be finalized include compiling list of available resources and distribution of outreach material for referrals to Weingart Center. A mass mailing will be completed this month to send out information to all identified GR/GROW Veterans.</p> <p>A.3. The implementation plan for this project is in progress. Items pending include computer enhancements from LEADER to track progress and completion of MSARP treatment (GR Program); once this process is completed, information will be interfaced to MAPPER for expansion of services to qualifying participants. Expected completion date is November 2010.</p> <p>B & C. Projects 12 B&C were implemented on August 2, 2010 with limited services. Full implementation of this project is in progress. Items pending completion include amendments to GROW contracts to incorporate services to Volunteers and some programmatic changes. Target date for full implementation is November 2010.</p> <p>C. Enhance services for Needs Special Assistance (NSA)</p>	

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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NO	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
12	<p>participants by providing them voluntary employment preparation services and mental health treatment through the GROW Program. Volunteers would not be subject to sanctions.</p> <p>D. Establish collaboration between DPSS, DCFS, and Probation to provide enhanced services to GROW participants ages 18-24 who come out of foster care and probation.</p> <p>E. Develop a comprehensive and ongoing evaluation plan of GROW to track outcomes for GR participants, including, but not limited to, education and training outcomes, length of employment obtained through GROW, and recidivism.</p>	<p>D. A workgroup meeting took place on August 26, 2010 to discuss action items needed to implement this project. A follow-up conference call with DCFS/Probation to discuss finalizing of the implementation plan took place on September 13, 2010.</p> <p>E. An internal DPSS meeting took place in April 2010. Future follow-up meetings will be scheduled after the implementation plans have been further developed, in order to determine the best way to track relevant information. The development of this project is ongoing and the workgroup will continue to develop tracking mechanisms as the projects roll-out.</p>	NOVEMBER 2010
13	Establish collaboration between DPSS and the Probation Department to reduce the number of Emerging Adults (age 18-24) applying for GR benefits.	DPSS has established collaboration with DCFS and Probation Department to facilitate referrals to GROW services, including American Recovery and Reinvestment Act (ARRA) Projects. DPSS has designated a liaison to work with both departments on this effort.	IMPLEMENTED MAY 2010
14	Pursue federal reimbursement through FSET, at a rate of 50%, for mental health, domestic violence, and, to the extent possible, substance abuse services provided to GROW participants.	The DPSS plan that was submitted to the State was approved on May 5, 2010. Reimbursement through FSET for costs associated with support services to GROW participants can be claimed effective October 2009.	IMPLEMENTED MAY 2010
15	Establish collaboration with CSS, L.A. City and all other Workforce Investment Boards to provide job services and employment opportunities through the Work Source Centers, geared toward both youth and adult GROW	The workgroup for this project has been meeting monthly to develop a collaborative plan to provide comprehensive employment services to GROW participants. A list of WorkSource Centers and One Stops willing to participate in this project has been completed. Target implementation date	NOVEMBER 2010

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NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
	participants.	DPSS has informed the responsible workgroup of this project and there were no objections to this proposal.	IMPLEMENTED JUNE 2010
16	Expand GROW to include GED preparation.		
17	Conduct a comprehensive study of the Mandatory Substance Abuse and Recovery Program (MSARP) to evaluate its effectiveness.	CEO-SIB staff has shared a draft report, which was discussed during a meeting with DPSS staff. The data match with DPH was completed and merged with DPSS data in preparation for analysis. CEO-SIB is currently conducting the analysis.	DECEMBER 2010
18	A. DPSS and DPH-ADPA will evaluate the redesign of MSARP based upon the results of the evaluation. B. Use the evaluation outcomes and DPH-ADPA Rate Study to inform a resolicitation process for GR services. C. Evaluate the need for substance abuse treatment services for emerging adults ages 18-24 and the need to design specialized treatment services for this population.	DPSS is examining possible areas where legislative and regulatory changes may be necessary and feasible. The initial responsible workgroup meeting was convened on September 2, 2010. The workgroup has identified ten (10) potential concerns that with further research may formulate into a State or Federal legislative proposal for indigent adults. The workgroup is on target for their legislative submissions.	DECEMBER 2010
19	Develop State and federal legislative/regulatory proposals to assist indigent adults and/or mitigate County costs and work with stakeholders to develop these proposals.	A meeting to discuss data collection and computer programming for all SSI Advocacy-related recommendations was held on June 22, 2010. GR data, including GR Restructuring Data, will be collected and made available through DPSSMART, SSIMAP database. Data collection is an ongoing effort.	IMPLEMENTED Ongoing

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
SEPTEMBER 30, 2010

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
20	Include the GR Program in the County's and DPSS' strategic plans.	<p>The GR Program has been incorporated in the County's and DPSS' Strategic Plan.</p> <p>The County's Strategic Plan Objectives are:</p> <p>Objective 2: General Relief to SSI: By June 30, 2010, assess the success of the implementation of the GR to SSI project, working with the Department of Public Social Services, Health Services, Mental Health, and Public Health staff. Based upon the evaluation, determine whether to continue program and/or integrate with GR Efficiencies Initiative.</p> <p>Objective 3: By June 30, 2010, to achieve GR Efficiencies, develop recommendations with stakeholders, present plan to the Board of Supervisors, and begin project implementation.</p> <p>The DPS's Strategic Plan Objectives are:</p> <p>Objective I.1.7: By June 2010, redesign the General Relief Program to reduce homelessness, increase the number of customers who transition to SSI and increase the number of customers who become employed.</p>	IMPLEMENTED APRIL 2010
21	Conduct a pilot having the current Linkages GAIN Services Workers at two or three small DCFS offices work with the Children's Social Workers to utilize the Transition Conference as an opportunity to connect foster youth with County services.	The workgroup for this project met on August 26, 2010. A follow-up conference call with DCFS/Probation to discuss finalization of the implementation plan took place on September 13, 2010.	NOVEMBER 2010
22	Provide better screening for Veterans and better referrals for assistance with claims and strengthen DPSS case management for Veterans who are on GR to enable them to qualify faster for Veteran's benefits and services.	<p>An initial meeting was held in June 2010 with Legal Aid Foundation of Los Angeles (LAFLA), Public Counsel, and Department of Military and Veterans Affairs (DMVA).</p> <p>Project protocols for the DPSS/LAFLA pilot have been drafted and shared with the responsible workgroup. Comments were received from the workgroup in June 2010.</p> <p>Currently working with Public Counsel to develop a resource guide for Veteran participants.</p>	OCTOBER 2010

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
SEPTEMBER 30, 2010

No	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
		<p>A second meeting was held on August 17, 2010, with LAFLA to discuss the implementation of the pilot project.</p> <p>The DPSS/LAFLA Veterans pilot will be conducted in the Metro East office and is scheduled to begin on October 12, 2010. Space arrangements for LAFLA staff at the Metro East office are being made. Policy for this project has been drafted and is in the clearance process.</p>	
23	<p>Asses and enhance the current mechanisms designed to enable former foster care youth, medically indigent under 21 and probation youth to receive and retain Medi-Cal.</p>	<p>An internal meeting was held on May 25, 2010 to discuss current DPSS efforts on this subject.</p> <p>Children in foster care automatically continue on Medi-Cal until they reach age 21; however, 50% of cases are terminated at redetermination for failure to respond.</p> <p>DPSS is currently taking Medi-Cal applications at probation camps only for minor consent services (Medi-Cal for individuals who need continuous services; e.g., pregnancy, mental health treatment, counseling, drug and alcohol abuse). DPSS is working with Probation on an automated listing of youth who are within 90 days of being released from the Probation system. Interface with Probation will be ready in July 2010. Draft protocols are being developed.</p> <p>The meeting with the responsible workgroup originally scheduled for July has been rescheduled for October 2010.</p> <p>DPSS continues to work with Probation to establish a referral system to ensure probation youth are properly coded to receive and retain Medi-Cal.</p>	<p>NOVEMBER 2010</p>
24	<p>Increase the GR Participants resources by:</p> <p>A. Allowing GR recipients to remain on GR while saving more money. Permit GR participants to maintain a</p>	<p>A. Instructions are being developed to provide line staff with the proposed policy.</p>	

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
	<p>Restricted Savings Account up to a pre-determined amount for the purpose of saving for housing, education or training expenses, and/or to start a business that would not be countable towards the property limit.</p> <p>B. Helping participants who have child support obligations by:</p> <ol style="list-style-type: none"> 1. Educating workers and participants about the assistance DPSS currently offers to help lower child support payments for participants. 2. Work with the Child Support Services Department to reduce child support payments for participants after they leave GR for the first six months they have a job, to allow them to get on their feet before resuming higher child support payments. 	<p>B.1. Draft protocols will be developed to educate DPSS staff on assisting GR participants with lowering their child support payments.</p> <p>B.2. The tentative meeting with the Child Support Services Department scheduled for July 2010 did not take place. A new meeting will be held in October 2010.</p>	NOVEMBER 2010
25			
26			
27			

GR RESTRUCTURING MASTER IMPLEMENTATION CHART

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NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
28	homelessness. Fund this account with savings from enhanced GR services, including but not limited to GR grant savings for participants who receive a rental subsidy and secure employment/SSI, and Interim Assistance Reimbursement for rental subsidies for GR participants who qualify for SSI.	<p>Assist GR participants manage their money better by:</p> <ul style="list-style-type: none"> ▪ Formulating a list of banks that allow recipients to establish accounts with no minimum balances and minimal overdraft fees. ▪ Assembling training materials instructing clients about budgeting and money management as well as the security advantages of keeping their funds in a bank account. The instruction topics would also include balancing their check book, if utilizing an ATM to check their account status, and avoiding bank fees. ▪ Focusing on providing this information to GR participants securing SSI benefits. ▪ Engaging with community organizations involved with assisting individuals with money management issues. ▪ Seeking volunteer agencies who will offer training or assistance to GR participants on money management. 	<p>Three workgroup meetings have been conducted to brainstorm and develop an implementation plan. Met with representatives from a local bank to learn what they can offer to GR participants and what training they can provide to Supplemental Security Income Medi-Cal Advocacy Program (SSIMAP) staff. A focus group meeting was conducted with SSI Advocates on August 19, 2010, to better define their role under this recommendation.</p> <p>Money management training for SSIMAP staff will be conducted by Consumer Action (training agency). Training is scheduled for October 2010.</p>
29			JANUARY 2011
30			JANUARY 2011

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SEPTEMBER 30, 2010

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
	Improve upon DPSS' GR SSI and Medi-Cal Advocacy Program by:	<p>A new meeting will be scheduled in October 2010 with board and care operators that manage large board and care operators to discuss the increase of utilization.</p>	DECEMBER 2010
31	<p>1. Advocating for a change in federal regulations that would extend the protected filing date from 60 days to as many as 365 days, to increase the period of time during which the County could secure Interim Assistance Reimbursement for GR grants/rental subsidies and retroactive Medi-Cal.</p> <p>2. Customizing the approach to securing SSI based on the condition and available documentation for individual GR participants by:</p> <ul style="list-style-type: none"> • Better identifying GR participants who are potentially eligible for SSI through a more extensive medical and/or mental health disability assessment (approved in Phase One). • Evaluating available medical treatment documentation and utilizing the document retrieval process (approved in Phase One), if necessary. • Evaluating whether a comprehensive medical/mental health evaluation (approved in Phase One), and the resulting write-up would strengthen the SSI application, and, if so, refer the participant for an evaluation. • Making an appropriate decision about when to file the SSI application in order to increase the chance of approval, based on the participant's situation and the 	<p>We are awaiting a response from SSA regarding the feasibility of this change at a local level.</p> <p>2. A preliminary meeting with an internal DPSS focus group, comprised of DPSS SSI Advocates, was held on June 23, 2010, to discuss different ways of implementing these recommendations.</p> <p>See update for Recommendation #8.</p> <p>See update for Recommendation #9.</p> <p>See update for Recommendation #8</p>	OCTOBER 2010 In the process of drafting protocols for SSI Advocates.

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NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
32	results of any assessments, medical documentation, and/or evaluation. 3. Implementing the SSI/SSDI Outreach Access and Recovery (SOAR) principles and strategies. 4. Seeking training from Social Security Administration for DPSS SSI advocates on SSI medical disability standards and case development. 5. Developing the disability assessment and evaluation tools in consultation with medical/mental health professionals and experienced SSI advocates.	3. SOAR training has been completed. The last SOAR training session was held on 9/30/2010. 4. SSA Committed to provide training to DPSS staff. Future meetings with SSA will be held to finalize the training schedule. 5. See update for Recommendation #8	IMPLEMENTED SEPTEMBER 2010 OCTOBER 2010 DECEMBER 2010
33	Provide ancillary expenses for showers, shoes, clothes, etc., for those pursuing SSI, including a motel voucher for the night before an SSI appointment with California Department of Social Services or Social Security Administration, when needed to enable the participant to arrive on time.	A preliminary meeting with an internal DPSS focus group comprised of DPSS SSI Advocates to discuss the different ways of implementing the recommendation was held on June 23, 2010. The responsible workgroup meeting with all partners to discuss the project's course of action was held on June 24, 2010.	OCTOBER 2010
34	Collaborate with private medical facilities to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI as part of the current DPSS-DHS homeless release project.	The workgroup met on September 22, 2010 to review the draft guidelines. We are in process of finalizing guidelines.	JANUARY 2011
	Assist GR participants applying for SSI benefits by:	The first meeting with the responsible workgroup to discuss the protocols for this project was held on June 23, 2010.	OCTOBER 2010
	<ul style="list-style-type: none"> ▪ Identifying GR participants who are in need of mental health treatment to secure medical documentation needed to secure SSI; ▪ Subject to funding, providing mental health treatment to those participants; ▪ Prioritizing mental health services for GR participants who need to pursue SSI; 	A second workgroup meeting was held on September 7, 2010. DMH, DPH, and Advocate representatives were present. The group discussed the recommendation and how to identify the participants in need of treatment to secure SSI and the need to document those who cannot be treated due to lack of funds.	

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NO	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
35	<ul style="list-style-type: none"> ▪ Documenting those who cannot be treated due to lack of funding; ▪ Ensuring cost recoupment from retroactive Medi-Cal; ▪ Assessing current procedures for providing mental health treatment to GR participants; and ▪ Recommending changes to better keep participants engaged in treatment. <p>DPSS SSI Advocates should provide case management that will help GR SSI applicants keep track of appointments.</p>	<p>Some suggestions were made, but the lack of available funding was a barrier. The next workgroup meeting will be held in October 2010.</p> <p>Project on target for implementation.</p>	OCTOBER 2010
36	<p>Pursue a pilot to coordinate ongoing health and mental health treatment for GR participants pursuing SSI, dependent upon available funding.</p> <p>36</p>	<p>The first meeting with the responsible workgroup to discuss the protocols for this project was held on June 23, 2010.</p> <p>The workgroup met again on September 7, 2010 to discuss pursuing the recommended pilot. The group discussed the lack of available funding and the possibility of a pilot in an area that has both a DPH health clinic and a DMH mental health facility in close proximity. The group agreed to meet in October 2010.</p>	DECEMBER 2010
37	<p>Strengthen current process to identify GR participants who were previously on SSI and prioritize SSI advocacy for them.</p>	<p>A preliminary meeting with an internal DPSS focus group comprised of DPSS SSI Advocates was held on June 23, 2010, to discuss different ways of implementing the recommendation. The responsible workgroup meeting with all partners to discuss the project's course of action was held on June 24, 2010.</p> <p>In the process of finalizing the guidelines for SSI Advocates.</p>	OCTOBER 2010

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GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE								
38	<p>Establish the following targets for SSI Approvals:</p> <ol style="list-style-type: none"> For SSI applications filed in FY 10/11 and ongoing, increase the SSI approval rate at the initial application level to at least 50% in FY 10/11, to at least 60% in FY 11/12, and to at least 70% in FY 12/13. For the overall number of SSI approvals, increase the number of SSI approvals as follows: <table border="1" data-bbox="572 1288 768 1879"> <thead> <tr> <th>FY 2008-09 Baseline</th> <th>FY 2010-11 Target</th> <th>FY 2011-12 Target</th> <th>FY 2012-13 Target</th> </tr> </thead> <tbody> <tr> <td>5891</td> <td>6400</td> <td>6900</td> <td>7400</td> </tr> </tbody> </table> <p>Address/fix non-disability related SSI eligibility issues such as citizenship documentation, birth certificate, etc.</p>	FY 2008-09 Baseline	FY 2010-11 Target	FY 2011-12 Target	FY 2012-13 Target	5891	6400	6900	7400	<p>The workgroup meeting to discuss different ways of accomplishing the targets for SSI approvals was held on June 24, 2010.</p> <p>After all of the GR recommendations are implemented, the Advocates believe that they will have additional tools to enhance services to participants and to assist with more complete applications being submitted to SSA for SSI approval.</p> <p>The SSI targets were reiterated in the GR SSIMAP bi-monthly Newsletter and at the SSI Advocates Quarterly meeting.</p>	<p>IMPLEMENTED JUNE 2010 and ongoing</p>
FY 2008-09 Baseline	FY 2010-11 Target	FY 2011-12 Target	FY 2012-13 Target								
5891	6400	6900	7400								
39	<p>Strengthen existing relationships with the Social Security Administration.</p>	<p>The responsible workgroup meeting with all partners was held on June 24, 2010.</p> <p>A second Workgroup meeting was held on August 29, 2010. The SSI Advocates exchanged valuable tips on how to resolve non-disability SSI eligibility issues. We are currently drafting a document to show how non-disability issues may be addressed. This document will be shared with DPSS line staff.</p>	<p>OCTOBER 2010</p>								
40		<p>An upper level management meeting with the Social Security Administration, Veterans Administration, CEO and various County Departments was held on June 22, 2010. The purpose of the meeting was to stress the importance of collaboration among departments for the successful implementation of the GR Restructuring projects.</p>	<p>IMPLEMENTED AUGUST 2010</p>								

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GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
	<p>Implement a transportation pilot project to evaluate the impact of providing monthly bus passes to two groups of GR participants to determine whether providing bus passes (instead of individual tokens) increases their likelihood of approval for SSI:</p> <ol style="list-style-type: none"> 1. GR participants pursuing SSI, and 2. GR participants receiving a housing subsidy and pursuing SSI. <p>The pilot will consist of 200 GR participants. Each participant will contribute \$10 per month toward the cost of the bus pass.</p> <p>Results will be compared after one year of the pilot. If providing bus passes is shown to be a good method of helping participants obtain approval of SSI benefits more quickly, DPSS will then explore ways of providing them to more participants.</p>	<p>approvals among GR participants. Agencies agreed to meet quarterly to discuss progress made.</p> <p>A meeting with the responsible workgroup to discuss the project's course of action was held on June 24, 2010. A second workgroup meeting was held on September 22, 2010, to review the draft guidelines for the pilot.</p> <p>Recommendations from the previous meetings will be presented for further discussion at a focus group to be held in October 2010.</p>	NOVEMBER 2010
41			
42		<p>Reconstitute the GR Restructuring Workgroup as the GR Restructuring Steering Committee to meet quarterly to do the following:</p> <ul style="list-style-type: none"> ■ Work together on the implementation process; ■ Review evaluation data and make recommendations for any adjustments to processes or targets; and ■ Identify and pursue opportunities for GR service integration. 	<p>IMPLEMENTED JUNE 2010</p> <p>The first quarterly meeting of the GR Restructuring Steering Committee was held on July 27. The group was given a status update on each of the 42 recommendations.</p> <p>(Updated 9/29/10)</p>



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WILLIAM T FUJIOKA
Chief Executive Officer

February 23, 2011

Board of Supervisors
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MARK RIDLEY-THOMAS
Second District

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Third District

DON KNABE
Fourth District

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Fifth District

To: Mayor Michael D. Antonovich
Supervisor Gloria Molina
Supervisor Mark Ridley-Thomas
Supervisor Zev Yaroslavsky
Supervisor Don Knabe

From: William T Fujioka
Chief Executive Officer



GENERAL RELIEF RESTRUCTURING PLAN: QUARTERLY UPDATE

This is to provide a report on the progress of the implementation of the General Relief (GR) Restructuring Plan (RP).

On April 24, 2009, on a motion by Supervisor Knabe, your Board instructed the Chief Executive Officer (CEO), in collaboration with the Department of Public Social Services (DPSS), and consultation with County Counsel, to design a potential GR Program that will better assist GR participants, with the expectation that more of these individuals would be able to transition off of County assistance. In response, the GR Restructuring Workgroup (RW), consisting of 11 County departments and ten stakeholders, was convened. On February 9, 2010, your Board approved the comprehensive plan to restructure the GR Program. This plan consisted of 42 recommendations designed to reduce the GR caseload over time by focusing services on housing assistance, Supplemental Security Income (SSI) advocacy, and employment preparation.

The GR RW members were invited to participate in various workgroups that were convened by DPSS to assist in the implementation of the plan. Several internal DPSS meetings, and meetings with other County departments and community stakeholders, have taken place to discuss the implementation of the various GR restructuring projects. As a result of the great support and collaboration from the different partners, 13 GR Restructuring Recommendations have already been implemented and substantial progress has been made on numerous additional recommendations.

PERFORMANCE DATA ON KEY GR RESTRUCTURING PROJECTS

- Recommendation No. 5 - Expansion of the Housing Subsidy Project (HSP)

The GR Housing Subsidy Program has a total of 1540 slots. The slots will increase over time, as funding becomes available through the GR Anti-Homelessness Account (AHA).

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Currently, there are 1,035 individuals receiving a housing subsidy and 303 subsidies pending approval.

- Recommendation No. 8 - Mental Health Assessments

Department of Mental Health (DMH) reported that in December 2010, its Clinicians saw 815 participants and determined that 792 of them have a mental health disability, of which 227 have a permanent mental health disability. This translates into 28.6 percent of individuals assessed as having a permanent mental health disability, compared to only 1.5 percent under the prior more cursory mental health screening conducted by non-licensed DMH staff. This means that more GR participants are determined to be potentially eligible for SSI and provided SSI advocacy services. If approved for SSI, these individuals will exit GR.

- Recommendation No. 9 - Record Retrieval Project

This project requires collaboration with Department of Health Services (DHS), DMH, and the Los Angeles County Sheriffs' Department (LASD) to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI. Since inception of the Project in August 2010, DPSS has received a total of 385 sets of medical records from DMH, DHS, and LASD.

An update on all 42 GR restructuring projects is provided on the attached GR Restructuring Master Implementation Chart. We will provide the next quarterly report in May 2011.

If you have any questions, please let me know or your staff may contact Kathy House, Assistant Chief Executive Officer at (213) 974-4530, or khouse@ceo.lacounty.gov.

WTF:KH:DS
JB:ljp

Attachment

c: Executive Officer, Board of Supervisors
 County Counsel
 Children and Family Services
 Community and Senior Services
 Health Services
 Mental Health
 Probation
 Public Defender
 Public Health
 Public Social Services
 Sheriff's Department

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
DECEMBER 31, 2010

Attachment

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
1	<p>Subject to applicable confidentiality requirements, use the Adult Linkages Project mechanism to identify the County service history of GR applicants/participants, so that applicants/participants can be offered services that take into account the totality of their individual circumstances.</p> <p>On November 16, 2010, the Board of Supervisors approved the Enterprise Linkage Project (ELP), and an agreement with SAS Institute as the contractor for implementing this expansion of the Adult Linkages Project (ALP). A draft Master Memorandum of Agreement (MOA) between the CEO and the eight County departments, who will be sharing data for this project, was distributed for review and comments. Kick-off meeting is scheduled for February 9, 2011.</p>	<p>The Chief Executive Office (CEO) approved funding for the one-time cost implementation of this recommendation. CEO-SIB is currently working with SAS (contractor), DPSS, and County Counsel to develop the system that will be used by DPSS eligibility staff to access real time service utilization records for GR applicants/participants.</p>	<u>JUNE 2011</u>
2	<p>The County should develop an innovative service integration model that can support County departments, other governmental entities, and community partners in concurrently serving a shared clientele.</p> <p>Increase integration of services between the Sheriff's Department and DPSS by:</p> <ul style="list-style-type: none"> A. Developing a plan to enhance the current County jail match to identify individuals who are incarcerated and have a linkage to GR benefits, to provide pre- and post-release services and SSI Advocacy that will assist with their re-entry into society. B. Assessing the DPSS/Sheriff's Homeless Release Project to determine its effectiveness. C. Implementing a review protocol to determine whether any outstanding warrants remaining on the GR/SSI applicant's record should be cleared, recalled or withdrawn. D. Ensuring that probation, parole, and other warrants that should have been satisfied by a GR/SSI applicant's stay in jail have been withdrawn or recalled. E. Appointing a liaison for individuals with outstanding warrants are resolved prior to releasing inmates. 	<p>Research is still pending on this project.</p>	<u>DECEMBER 2011</u>
3		<p>A meeting was held on July 7, 2010 with the designated workgroup, which includes DPSS, Sheriff, Public Defender and a representative from the Public Social Services (PSS) Commission.</p> <p>The Department of Public Social Services (DPSS) presented an overview of the current Jail Match and enhancements were recommended. Additionally, an overview of the Public Social Services (PSS) Homeless Project was presented.</p>	<u>FEBRUARY 2011</u>

Note: New updates are underlined

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1	<p>warrants whom advocates and County employees can contact directly to: (1) inquire about the underlying reason and validity of a warrant and (2) assist the SSI advocate in "clearing up" the warrant.</p> <p>F. Referring disabled individuals exiting jail who apply for GR to a SSI advocate/liaison, in order to re-establish SSI benefits and work with agencies (i.e., probation, parole, public defender, courts, etc.) to recall existing warrants.</p> <p>G. Referring disabled individuals exiting jail who do not have SSI benefits to GR SSIMAP for benefits establishment.</p>	<p>A second meeting was held on September 9, 2010. DPSS and LASD are working to identify additional data fields for the jail match listing to ensure more matches are made when the listing is run. The workgroup also discussed ways to clear warrants for potentially Supplemental Security Income (SSI) eligible inmates who have prior GR history. A Custody Assistant candidate has been identified to be a liaison between staff and the LASD to help clear warrants for potentially SSI eligible inmates who have prior GR history.</p> <p>A sub-workgroup meeting was held on December 14, 2010 to develop a referral process to refer released inmates to DPSS for SSI advocacy. Additionally, an IT meeting was held on January 12, 2011, to discuss the jail match process between LASD and DPSS. The CEO SIIB was in attendance. Suggestions made at the meeting to enhance the jail match are currently under review.</p>	<u>DECEMBER 2011</u>
2	<p>Encourage police agencies to make social services referrals for the homeless and connect them with resources, rather than issuing citations.</p>	<p>A meeting was held on June 17, 2010 with the Long Beach Police Department, L.A. County Sheriff's Department and Community partners.</p> <p>The Long Beach Police Department and LASD provided an overview of their services to the homeless population.</p> <p>DPSS will work with the police agencies to create a simple informational document in multiple languages to distribute to the homeless and connect them to services. LASD has agreed to draft the informational document.</p> <p>The follow-up meeting tentatively scheduled for October 2010 with the Los Angeles Police Department and Community Advocates did not take place. The informational document had not been finalized to share at the meeting. LASD has the lead on this document. A meeting with LASD is being requested to re-assess the document information.</p>	<u>DECEMBER 2011</u>
3	<p>Enhance Subsidized Housing by:</p>	<p>The following key points were implemented in the Administrative Directive which was released to Project staff on August 2, 2010, for instructions and procedures:</p>	<u>IMPLEMENTED AUGUST 2010</u>

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	<p>A. Increasing the total number of housing subsidies to 10,000 by December 2014.</p> <p>B. Increasing the number of housing subsidies for homeless disabled GR participants pursuing, or willing to pursue, SSI and/or veterans benefits, so that 100% of homeless disabled GR participants pursuing SSI and/or veterans benefits are offered a housing subsidy within 5 years.</p> <p>C. Increasing the number of housing subsidies for homeless, employable GR participants.</p> <p>D. As in the current GR Housing and Case Management Project:</p> <ul style="list-style-type: none"> a. Subsidized housing itself should not be time-limited, allowing people to stay as permanent residents, after they start receiving outside income and can pay for their housing. b. The housing subsidy should be encouraged, but not required. <p>E. Increasing the GR rental subsidy amount from \$300 to \$400 and reducing the participant's contribution from the grant from \$136 to \$100, so the total amount available for rent will be \$500.</p> <p>F. Pursuing federal reimbursements for housing subsidy payments made to employable GR participants through the Food Stamp and Employment Training (FSET) fund at a rate of 50%; and pursuing reimbursement for housing subsidy payment made to GR participants who are approved for SSI through the Interim Assistance Reimbursement Program, at a rate of 100%.</p> <p>G. Reinvesting the money recouped from SSI (Interim</p>	<p>A. The GR Housing Subsidy Pilot has been expanded to include an additional 640 housing subsidy slots, bringing the total slots from 900 to 1,540. The current implementation plan projects to increase the housing subsidies based on the savings generated by GR participants who receive a housing subsidy and exit GR with work or disability benefits.</p> <p>B. & C. The new 640 housing subsidies added to the Pilot were allocated as follows: 320 for GR employable participants and 320 for GR disabled participants pursuing SSI and/or veterans benefits.</p> <p>D. Incorporated in the implementation Administrative Directive.</p>	

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1	Assistance Reimbursement for housing subsidies) in additional housing subsidies.	H. Recruiting participants for the Housing Subsidy and Case Management Program during the GR intake process and making additional efforts throughout the course of case management to encourage participants to remain in the Housing Subsidy and Case Management Program and identify causes of participants dropping out of the subsidy.	H. Two training sessions were conducted on July 15, 2010 to provide Project Staff, intake and approved eligibility staff, GROW Case Managers and SSI Advocates with the new procedures on the expansion of the Housing Subsidy Pilot Program. August 2, 2010, The final approved Administrative Directive was released and the expansion of the Housing Subsidy Pilot Program was implemented.
6	Implement a pilot project (subject to a cost benefit analysis) by master leasing and/or purchasing foreclosed apartment buildings and/or multi-family housing units and/or dorm-like housing to be provided for the indigent homeless population. This housing should be owned and/or operated by a non-profit housing developer and/or homeless service provider with expertise in managing housing with services.	Address supportive housing needs by:	Research is still pending on this project. DECEMBER 2011
7	A. Exploring housing options for mentally ill participants through City and County Housing Authorities and other smaller Housing Authorities throughout LA County. B. Identifying and leveraging County funding for housing resources and related services that already receive county funding or support.	A. DMH and DPSS staff held a pre-meet on April 27, 2010, to discuss possible housing experts and providers to be invited to assist with the implementation on this effort. A list of potential collaborative agencies was developed. The responsible workgroup met on June 24, 2010, to discuss the implementation plan for this project. B. Additionally, Los Angeles Homeless Services Authority (LAHSA) staff made a presentation on Project 50. MHSA, A Community of Friends and some local missions were identified as agencies that offer potential housing options to mentally ill GR participants who meet their criteria.	A second workgroup meeting was held on August 4, 2010. A presentation on the Mental Health Services Act (MHSA) was made by Department of Mental Health (DMH) staff. Additionally, Los Angeles Homeless Services Authority (LAHSA) staff made a presentation on Project 50. MHSA, A Community of Friends and some local missions were identified as agencies that offer potential housing options to mentally ill GR participants who meet their criteria. DECEMBER 2011

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	<p>of the projects identified have limited funding. However, A Community of Friends, which is funded by the Community Development Commission (CDC) will be further explored.</p> <p>Project on target for implementation.</p>		
	<p>Subject to detailed operational and fiscal planning during Phase Two of the GR Restructuring process, eliminate the current cursory employability/NSA screening and replace it with a more extensive medical/mental health disability assessment performed by (1) DMH, (2) DHS or possibly DPH, and/or (3) DHS Public Private Partners (PPPs). For permanently disabled participants in need of additional documentation to support their SSI applications, a comprehensive medical/mental health evaluation would be performed. The extensive assessments and the comprehensive medical and mental health evaluations and write-ups will be funded with 50 - 75% new federal revenue.</p>	<ul style="list-style-type: none"> • New mental health assessment training completed on October 28, 2010. • DMH staff began conducting the new mental health assessments on October 12, 2010, at Metro Special, Metro East, San Fernando, Pasadena and Wilshire Offices. DMH will expand to all Districts on a staggered basis. • DMH submitted staff roll-out plan on October 5, 2010. • DMH reported that in December 2010 its Clinicians saw 815 participants and determined 792 of them to have a mental health disability, of which 227 have a permanent mental health disability. This translates into 28.6% of individuals screened having a permanent mental health disability compared to only 1.5% prior to implementation. This means that more GR participants are determined to be potentially eligible for SSI and provided SSI advocacy services. • The implementation of the new mental health disability assessments began with a DMH roll-out plan for the first group of ten Psychiatric Social Workers (PSWs) in October 2010, and was completed on December 27, 2010. Some new mental health assessments are now being done at 12 of the 14 GR District Offices. • DMH began the hiring process for eight additional PSWs and one Supervisor in January 2011. April 2011 is the target date to finalize hiring of all staff. 	<p>PARTIALLY IMPLEMENTED OCTOBER 2010</p> <p>FULL IMPLEMENTATION TARGETTED FOR APRIL 2011</p>

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	<p><u>Mental Health Disability Comprehensive Evaluation</u></p> <ul style="list-style-type: none"> • The workgroup met to discuss mental health comprehensive evaluations on November 17, 2010. • DMH agreed to draft an evaluation tool for the next meeting. • DMH submitted the budget for the Comprehensive Evaluations. • A Meeting was held with DMH and DPSS GR Program staff to discuss the comprehensive evaluations. DMH shared its draft comprehensive evaluation tool. <p><u>Medical Disability Assessment/Comprehensive Evaluations</u></p> <p>Subsequent to the Board's approval of this recommendation, the County Counsel for DHS determined that the medical disability assessments fall outside of the scope of the existing contracts with DHS' Public Private Partners (PPPs) and, thus, neither the medical disability assessments nor the comprehensive evaluations can be implemented through an amendment to current PPP contracts.</p> <p><u>DPSS will release a Request For Information (RFI) in an effort to identify Federally Qualified Health Centers (FQHC) and/or FQHC-like to provide the Medical Disability Assessment Services from May 1, 2011 until sometime in 2012. A competitive procurement process will be initiated during 2011 to secure one or more ongoing contractors beginning in 2012.</u></p>		MAY 2011

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	DHS, DMH, and LASD to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI. Most of the costs will be funded with 50% new federal revenue.	<p>Project protocols were released and SSI Advocacy staff trained. DPSS continues to meet with DMH, DHS and LASD to clarify issues, exchange best practices and measure the progress made.</p> <p>DHS has finalized hiring all seven Registered Nurses (RNs). DMH is in the process of hiring both of its RNs. The RN previously reported as hired did not take place. LASD has identified one RN who will work in this project on an interim basis until LASD hires a permanent staff person.</p> <p>A comprehensive training for RNs was conducted on August 13, 2010. Training presenters included staff from SSA, DDSD and DHS.</p> <p>The project was implemented in August 2010.</p> <p>DHS, DMH and LASD are now processing pre-clearance requests and retrieving medical and mental health records. <u>All</u> departments are now fully staffed for this project.</p>	<u>IMPLEMENTED AUGUST 2010</u>

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10	<p>Maximize the claiming of retroactive Medi-Cal for GR participants who qualify for SSI and Medi-Cal.</p> <p>A listing of GR participants who were approved for Supplemental Security Income (SSI) will be transmitted to DMH and DHS on a monthly basis. The first report was forwarded to DMH and DHS in September 2010. This list is a key factor in allowing them to significantly improve their retroactive Medi-Cal claims processing efforts for GR participants who were recently approved for SSI.</p>		<u>IMPLEMENTED SEPTEMBER 2010</u>
11	<p>Integrate the Public Defender (PD) into SSI Advocacy, where GR participants are already clients of the Public Defender and advocacy can be combined with clients' representation in court.</p>	<p>PD identified the Compton Courthouse as the location for this project. Staff has been selected. One DPSS SSI Advocate and one PD Psychiatric Social Worker II will be collocated at the PD site to provide SSI Advocacy services. A <u>workgroup meeting</u> was held in November 2010. The MOU project protocols and equipment installation are being finalized.</p>	<u>FEBRUARY 2011</u>
12	<p>Modify the GROW Program to:</p> <p>A. Customize services to individuals who are classified as:</p> <ol style="list-style-type: none"> 1. Transitional Age Youth (TAY); 2. Veterans; and 3. Participants exiting Mandatory Substance Abuse Program (MSARP). 	<p>A.1. The implementation plan for this project is being finalized by the workgroup. Items that need to be finalized include GROW Computer Programming changes; curriculum for specialized job club class by LACOE; instructions to staff. Implemented in January 2011. The plan is comprised of <u>two new GROW components designed to address the special needs of TAY participants. The components include a specialized job club for TAY participants at one GROW location and a new, advanced Computer Applications Class for TAY with strong, basic computer skills.</u></p>	<u>IMPLEMENTED JANUARY 2011</u>

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12	<p>B. Create a new voluntary category of GR participants who will be classified as employable with accommodations and will be referred to a new GROW component designed to provide employment services for individuals who can work with accommodations. Volunteers would not be subject to sanctions.</p> <p>C. Enhance services for Needs Special Assistance (NSA) participants by providing them voluntary employment preparation services and mental health treatment through the GROW Program. Volunteers would not be subject to sanctions.</p> <p>D. Establish collaboration between DPSS, DCFS, and Probation to provide enhanced services to GROW participants ages 18-24 who come out of foster care and probation.</p> <p>E. Develop a comprehensive and ongoing evaluation plan of GROW to track outcomes for GR participants, including, but not limited to, education and training outcomes, length of employment obtained through GROW, and recidivism.</p>	<p>Items pending include computer enhancements from LEADER to track progress and completion of MSARP treatment ; once this process is completed, information will be interfaced to MAPPER for expansion of services to qualifying participants. Expected completion date is <u>February 2011</u>.</p> <p>B & C. Projects 12 B&C were implemented on August 2, 2010 with limited services. Full implementation of this project is in progress. Items pending completion include amendments to GROW contracts to incorporate services to volunteers and some programmatic changes. Target date for full implementation is <u>March 2011</u>.</p> <p>D. A workgroup meeting took place on August 26, 2010 to discuss action items needed to implement this project. A follow-up conference call with DCFS/Probation to discuss finalizing the implementation plan took place on September 13, 2010.</p> <p>E. An internal DPS meeting took place in April 2010. Future follow-up meetings will be scheduled after the implementation plans have been further developed, in order to determine the best way to track relevant information.</p> <p>The development of this project is ongoing and the workgroup will continue to develop tracking mechanisms as the projects roll-out.</p>	<u>MARCH 2011</u> <u>FEBRUARY 2011</u> <u>JUNE 2011</u>
13	Establish collaboration between DPSS and the Probation Department to reduce the number of Emerging Adults (age 18-24) applying for GR benefits.	DPSS has established collaboration with DCFS and Probation Department to facilitate referrals to GROW services, including American Recovery and Reinvestment Act (ARRA) Projects. DPSS has designated a liaison to work with both departments	IMPLEMENTED MAY 2010

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		on this effort. This project was completed in May 2010.	
14	Pursue federal reimbursement through FSET, at a rate of 50%, for mental health, domestic violence, and, to the extent possible, substance abuse services provided to GROW participants.	The DPSS plan that was submitted to the State was approved on May 5, 2010. Reimbursement through FSET for costs associated with support services to GROW participants can be claimed effective October 2009.	IMPLEMENTED MAY 2010
15	Establish collaboration with CSS, L.A. City and all other Workforce Investment Boards to provide job services and employment opportunities through the Work Source Centers, geared toward both youth and adult GROW participants.	The workgroup for this project has been meeting monthly to develop a collaborative plan to provide comprehensive employment services to GROW participants. The following WorkSource Centers and One Stops want to participate in this project: <u>The Gardena South Bay One-Stop Business & Career Center</u> , <u>Inglewood South Bay One-Stop Business & Career Center</u> , <u>Southeast Los Angeles County Workforce Investment Board Youth Center</u> , <u>Southeast Los Angeles County Workforce Investment Board Youth Center, Southeast Los Angeles Crenshaw WorkSource Center</u> .	FEBRUARY 2011
16	Expand GROW to include GED preparation.	DPSS has informed the responsible workgroup of this project and there were no objections to this proposal.	IMPLEMENTED JUNE 2010
17	Conduct a comprehensive study of the Mandatory Substance Abuse and Recovery Program (MSARP) to evaluate its effectiveness. A. DPSS and DPH-ADPA will evaluate the redesign of MSARP based upon the results of the evaluation. B. Use the evaluation outcomes and DPH-ADPA Rate Study to inform a resolicitation process for GR services.	CEO-SIB staff has shared a draft report, which was discussed during a meeting with DPSS staff. The data match with DPH was completed and merged with DPSS data in preparation for analysis. CEO-SIB is currently conducting the analysis.	FEBRUARY 2011

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	C. Evaluate the need for substance abuse treatment services for emerging adults ages 18-24 and the need to design specialized treatment services for this population.		
18	Develop State and federal legislative/regulatory proposals to assist indigent adults and/or mitigate County costs and work with stakeholders to develop these proposals.	DPSS is examining possible areas where legislative and regulatory changes may be necessary and feasible. The workgroup has identified ten (10) potential concerns that with further research may formulate into a State or Federal legislative proposal for indigent adults. The last workgroup meeting was held on November 23, 2010.	<u>MARCH 2011</u>
19	DPSS to expand data collection for the GR Program.	A meeting to discuss data collection and computer programming for all SSI Advocacy-related recommendations was held on June 22, 2010. GR data, including GR Restructuring Data, will be collected and made available through DPSSSMART, SSIMAP database. Data collection is an ongoing effort.	IMPLEMENTED AUGUST 2010 Ongoing
20	Include the GR Program in the County's and DPSS' strategic plans.	<p>The GR Program has been incorporated in the County's and DPSS' Strategic Plan.</p> <p>The County's Strategic Plan Objectives are:</p> <p>Objective 2: General Relief to SSI: By June 30, 2010, assess the success of the implementation of the GR to SSI project, working with the Department of Public Social Services, Health Services, Mental Health, and Public Health staff. Based upon the evaluation, determine whether to continue program and/or integrate with GR Efficiencies Initiative.</p> <p>Objective 3: By June 30, 2010, to achieve GR Efficiencies, develop recommendations with stakeholders, present plan to the Board of Supervisors, and begin project implementation.</p> <p>The DPSS' Strategic Plan Objectives are:</p> <p>Objective I.1.7: By June 2010, redesign the General Relief Program to reduce homelessness, increase the number of customers who transition to SSI and increase the number of customers who become employed.</p>	IMPLEMENTED APRIL 2010

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21	Conduct a pilot having the current Linkages GAIN Services Workers at two or three small DCFS offices work with the Children's Social Workers to utilize the Transition Conference as an opportunity to connect foster youth with County services.	The workgroup for this project met on August 26, 2010. A follow-up conference call with DCFS/Probation to discuss finalization of the implementation plan took place on September 13, 2010. <u>Draft policy/procedures will be released for clearance in February 2011.</u>	<u>FEBRUARY 2011</u>
22	Provide better screening for Veterans and better referrals for assistance with claims and strengthen DPSS case management for Veterans who are on GR to enable them to qualify faster for Veteran's benefits and services.	<p>An initial meeting was held in June 2010 with Legal Aid Foundation of Los Angeles (LAFLA), Public Counsel, and Department of Military and Veterans Affairs (DMVA).</p> <p>Project protocols for the DPSS/LAFLA pilot have been drafted and shared with the responsible workgroup. Comments were received from the workgroup in June 2010.</p> <p>Currently working with Public Counsel to develop a resource guide for Veteran participants.</p> <p>A second meeting was held on August 17, 2010, with LAFLA to discuss the implementation of the pilot project.</p>	<u>PARTIAL IMPLEMENTATION</u> <u>DECEMBER 2010</u>
23	Assess and enhance the current mechanisms designed to enable former foster care youth, medically indigent under 21 and probation youth to receive and retain Medi-Cal.	<p>The DPSS/LAFLA Veterans pilot will be conducted in the Metro East office and is scheduled to begin on October 12, 2010. Space arrangements for LAFLA staff at the Metro East office are being made. Policy for this project has been drafted and is in the clearance process.</p> <p><u>The AD for the Veterans pilot was officially released in December 2010.</u></p> <p><u>A telephone conference call was held on December 20, 2010 between DMVA and DPSS to discuss the next steps to implement the project. Action items to implement the project are being worked on to move the project forward. An IT meeting between DMVA and DPSS is tentatively scheduled for the second half of February 2011.</u></p> <p>An internal meeting was held on May 25, 2010 to discuss current DPSS efforts on this subject.</p>	<u>FULL IMPLEMENTATION</u> <u>FEBRUARY 2011</u>

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	<p>Children in foster care automatically continue on Medi-Cal until they reach age 21; however, 50% of cases are terminated at redetermination for failure to respond, <u>mainly due to DPSS not having the individuals' current address.</u></p> <p>DPSS and DCFS have established a liaison to share address changes reported by the youth and thereby update their databases. Additionally, DPSS is in the process of finalizing a change of address card for former foster youth to mail to DPSS to report a change of address.</p> <p>DPSS is currently taking Medi-Cal applications at probation camps only for minor consent services (Medi-Cal for individuals who need continuous services; e.g., pregnancy, mental health treatment, counseling, drug and alcohol abuse).</p> <p>DPSS completed a data interface system to identify youth who are soon to be released from the probation system.</p>	<p>MAY 2011</p>	
24	<p>Increase the GR Participants resources by:</p> <p>A. Allowing GR recipients to remain on GR while saving more money. Permit GR participants to maintain a Restricted Savings Account up to a pre-determined amount for the purpose of saving for housing, education</p>	<p>A. <u>Research is still pending on the viability of implementing this segment.</u></p>	

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	or training expenses, and/or to start a business that would not be countable towards the property limit.	B.1. Draft protocols will be developed to educate DPSS staff on assisting GR participants with lowering their child support payments.	<u>DECEMBER 2011</u>
	B. Helping participants who have child support obligations by: 1. Educating workers and participants about the assistance DPSS currently offers to help lower child support payments for participants.	B.2. The tentative meeting with the Child Support Services Department scheduled for July 2010 did not take place. A new meeting will be held in March 2011.	
25	2. Work with the Child Support Services Department to reduce child support payments for participants after they leave GR for the first six months they have a job, to allow them to get on their feet before resuming higher child support payments.		
26	Add positions in GR offices, through September 30, 2010, utilizing TANF emergency contingency funds (ECF), to assist GR participants navigate the GR process. Positions may be filled with GR non-custodial parents (NCPs) who qualify for ECF-funded subsidized employment.	This project was completed with the hiring of six participants who worked as Customer Services Assistants (CSAs) in the GR Districts lobby until September 30, 2010, when the available funding ended.	IMPLEMENTED MAY 2010
27	CEO-SIB to conduct an evaluation of GR Program mandates, rules, time limits, sanctions, operational processes, and data limitations, including a cost/benefit analysis.	CEO-SIB identified two contractors to conduct the evaluation of the GR Program. The first contractor secured to perform the Quantitative Process Analysis of Los Angeles County's GR Program is University of Sciences in Philadelphia.	MARCH 2011
		The second contractor secured to perform the Qualitative Process Analysis of Los Angeles County's GR Program is Linda Shaw, Ph.D., from California State University San Marcos. An action plan was developed by the contractors to convene focus groups to interview Eligibility Workers and Administrative staff. These focus groups were convened in August 2010. Researchers convened focus groups and interviewed GR participants in January 2011.	JUNE 2011
	Establish a GR Anti-Homelessness Account in the CEO's Assistance budget in August 2010.	The Anti-Homelessness Account was set up in the DPSS	IMPLEMENTED AUGUST 2010

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28	<p>budget to fund enhanced services to reduce GR homelessness. Fund this account with savings from enhanced GR services, including but not limited to GR grant savings for participants who receive a rental subsidy and secure employment/SSI, and Interim Assistance Reimbursement for rental subsidies for GR participants who qualify for SSI.</p> <p>Assist GR participants manage their money better by:</p> <ul style="list-style-type: none"> ▪ Formulating a list of banks that allow recipients to establish accounts with no minimum balances and minimal overdraft fees. ▪ Assembling training materials instructing clients about budgeting and money management as well as the security advantages of keeping their funds in a bank account. The instruction topics would also include balancing their check book, if utilizing an ATM to check their account status, and avoiding bank fees. ▪ Focusing on providing this information to GR participants securing SSI benefits. ▪ Engaging with community organizations involved with assisting individuals with money management issues. ▪ Seeking volunteer agencies who will offer training or assistance to GR participants on money management. 	<p>Three workgroup meetings have been conducted to brainstorm and develop an implementation plan. Met with representatives from a local bank to learn what they can offer to GR participants and what training they can provide to Supplemental Security Income Medi-Cal Advocacy Program (SSIMAP) staff. A focus group meeting was conducted with SSI Advocates on August 19, 2010, to better define their role under this recommendation.</p> <p>Money management training for SSIMAP staff was conducted by Consumer Action in October 2010. Draft policy/procedures were released for clearance in January 2011, and will be finalized to be released to staff in February 2011.</p>	FEBRUARY 2011
29	<p>Do not limit the housing subsidy to 9 months for employable GR participants. Instead, permit employable GR participants who reach the 9-month time limit to continue receiving the subsidy during the 3 months that they are ineligible to GR.</p>	<p>A LEADER Change Request has been initiated to allow employable GR participants to receive housing subsidy after they reach the 9-month time limit.</p>	DECEMBER 2011
30	<p>DPSS should engage in a dialogue with board and care operators to determine how to increase usage of board and care facilities by homeless GR participants. Explore providing information to GR participants on board and care facilities upon release from emergency rooms or hospitals.</p>	<p>A meeting with two Board and Care agencies to discuss other housing options for homeless GR participants took place on June 23, 2010.</p> <p>A meeting with the Workgroup was conducted on August 16, 2010 to discuss and identify an approach to start the dialogue with the board and care operators.</p>	MARCH 2011

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NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
	<p><u>DPSS plans to draft a letter to outreach to Board and Care operators to see if they will be interested in providing housing to homeless participants. Board and Care operators will be provided information about the need for housing for GR homeless individuals and the opportunity to collaborate with DPSS. Those who are interested will be instructed to call DPSS to further discuss the project.</u></p>		<u>JUNE 2011</u>
31	<p>Improve upon DPSS' GR SSI and Medi-Cal Advocacy Program (GRSSIMAP) by:</p> <ol style="list-style-type: none"> 1. Advocating for a change in federal regulations that would extend the protected filing date from 60 days to as many as 365 days, to increase the period of time during which the County could secure Interim Assistance Reimbursement for GR grants/rental subsidies and retroactive Medi-Cal. 2. Customizing the approach to securing SSI based on the condition and available documentation for individual GR participants by: <ul style="list-style-type: none"> • Better identifying GR participants who are potentially eligible for SSI through a more extensive medical and/or mental health disability assessment (approved in Phase One). • Evaluating available medical treatment documentation and utilizing the document retrieval process (approved in Phase One), if necessary. 	<p>DPSS is in the process of drafting and submitting a proposal to SSA to propose changes at the local level, as an alternative to seeking a change in federal regulations.</p> <p>2. The responsible workgroup met on November 18, 2010. A meeting with a focus group comprised of community and SSI Advocates will be scheduled for February 22, 2011, to review a new approach for the development of a GR SSI MAP Handbook to define guidelines for the SSI Advocates.</p>	<u>MAY 2011</u>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
DECEMBER 31, 2010

Attachment

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
	<ul style="list-style-type: none"> • Evaluating whether a comprehensive medical/mental health evaluation (approved in Phase One), and the resulting write-up would strengthen the SSI application, and, if so, refer the participant for an evaluation. • Making an appropriate decision about when to file the SSI application in order to increase the chance of approval, based on the participant's situation and the results of any assessments, medical documentation, and/or evaluation. 3. Implementing the SSI/SSDI Outreach Access and Recovery (SOAR) principles and strategies. 4. Seeking training from Social Security Administration for DPSS SSI advocates on SSI medical disability standards and case development. 5. Developing the disability assessment and evaluation tools in consultation with medical/mental health professionals and experienced SSI advocates. 	<p>The responsible workgroup met on November 18, 2010. A meeting with a focus group comprised of community and SSI Advocates will be scheduled for February 22, 2011 to review a new approach for the development of a GR SSIMAP Handbook to define guidelines for the SSI Advocates.</p> <p>3. SOAR training has been completed. The last SOAR training session was held on September 30, 2010.</p> <p>4. SSA committed to provide training to DPSS staff. Future meetings with SSA will be held to finalize the training schedule.</p> <p>5. See update for Recommendation #8.</p>	<u>IMPLEMENTED</u> <u>SEPTEMBER 2010</u> <u>APRIL 2011</u> <u>PARTIALLY IMPLEMENTED</u> <u>OCTOBER 2010</u>
32	Provide ancillary expenses for showers, shoes, clothes, etc., for those pursuing SSI, including a motel voucher for the night before an SSI appointment with California Department of Social Services or Social Security Administration, when needed to enable the participant to arrive on time.	A preliminary meeting with an internal DPSS focus group comprised of DPSS SSI Advocates to discuss the different ways of implementing the recommendation was held on June 23, 2010. The responsible workgroup meeting with all partners to discuss the project's course of action was held on June 24, 2010.	<p>The workgroup met on September 22, 2010 and December 7, 2010 to review the draft guidelines. Training was held in January 2011. We are in process of finalizing guidelines.</p>
33	Collaborate with private medical facilities to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI as part of the current	The Hollywood Presbyterian and White Memorial hospitals were not available to meet in August, as initially expected. However, both hospitals expressed interest in this project and	MARCH 2011

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
DECEMBER 31, 2010

Attachment

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
	DPSS-DHS homeless release project.	agreed to meet sometime in October to hear more details about the project. However, hospital staff were unable to meet in October. An official invitation to participate in the Record Retrieval Project will be mailed to the Hollywood Presbyterian and White Memorial hospitals in February 2011.	
34	<p>Assist GR participants applying for SSI benefits by:</p> <ul style="list-style-type: none"> ▪ Identifying GR participants who are in need of mental health treatment to secure medical documentation needed to secure SSI; ▪ Subject to funding, providing mental health treatment to those participants; ▪ Prioritizing mental health services for GR participants who need to pursue SSI; ▪ Documenting those who cannot be treated due to lack of funding; ▪ Ensuring cost recoupment from retroactive Medi-Cal; ▪ Assessing current procedures for providing mental health treatment to GR participants; and ▪ Recommending changes to better keep participants engaged in treatment. 	<p>The first meeting with the responsible workgroup to discuss the protocols for this project was held on June 23, 2010.</p> <p>A second workgroup meeting was held on September 7, 2010. DMH, DPH, and Advocate Representatives were present. The group discussed the recommendation and how to identify the participants in need of treatment to secure SSI and the need to document those who cannot be treated due to lack of funds. Some suggestions were made, but the lack of available funding was a barrier. <u>A third workgroup meeting was held in October 2010.</u></p>	<u>MAY 2011</u>
35	DPSS SSI Advocates should provide case management that will help GR SSI applicants keep track of appointments.	A preliminary meeting with an internal DPSS focus group comprised of DPSS SSI Advocates was held on June 23, 2010, to discuss different ways of implementing the recommendation. The responsible workgroup meeting with all partners to discuss the project's course of action was held on June 24, 2010.	<u>MARCH 2011</u>
		The workgroup generated recommendations which are currently under review and will be released via the GR SSIMAP Handbook. <u>The responsible workgroup met on November 18, 2010.</u>	

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
DECEMBER 31, 2010

Attachment

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE								
36	Pursue a pilot to coordinate ongoing health and mental health treatment for GR participants pursuing SSI, dependent upon available funding.	The first meeting with the responsible workgroup to discuss the protocols for this project was held on June 23, 2010. The workgroup met again on September 7, 2010 to discuss pursuing the recommended pilot. The group discussed the lack of available funding and the possibility of a pilot in an area that has both a DPH health clinic and a DMH mental health facility in close proximity. <u>The workgroup met in October 2010.</u>	<u>SEPTEMBER 2011</u>								
37	Strengthen current process to identify GR participants who were previously on SSI and prioritize SSI advocacy for them.	A preliminary meeting with an internal DPSS focus group comprised of DPSS SSI Advocates was held on June 23, 2010, to discuss different ways of implementing the recommendation. The responsible workgroup meeting with all partners to discuss the project's course of action was held on June 24, 2010. DPSS is in the process of finalizing the guidelines for SSI Advocates. <u>The responsible workgroup met on December 7, 2010.</u>	<u>MARCH 2011</u>								
38	Establish the following targets for SSI Approvals: 1. For SSI applications filed in FY 10/11 and ongoing, increase the SSI approval rate at the initial application level to at least 50% in FY 10/11, to at least 60% in FY 11/12, and to at least 70% in FY 12/13. 2. For the overall number of SSI approvals, increase the number of SSI approvals as follows:	The workgroup meeting to discuss different ways of accomplishing the targets for SSI approvals was held on June 24, 2010. After all of the GR recommendations are implemented, the Advocates believe that they will have additional tools to enhance services to participants and to assist with more complete applications being submitted to SSA for SSI approval. <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <th>FY 2008-09 Baseline</th> <th>FY 2010-11 Target</th> <th>FY 2011-12 Target</th> <th>FY 2012-13 Target</th> </tr> <tr> <td>5891</td> <td>6400</td> <td>6900</td> <td>7400</td> </tr> </table>	FY 2008-09 Baseline	FY 2010-11 Target	FY 2011-12 Target	FY 2012-13 Target	5891	6400	6900	7400	IMPLEMENTED JUNE 2010 and ongoing
FY 2008-09 Baseline	FY 2010-11 Target	FY 2011-12 Target	FY 2012-13 Target								
5891	6400	6900	7400								
39	Address/fix non-disability related SSI eligibility issues such as citizenship documentation, birth certificate, etc.	The responsible workgroup meeting with all partners was held on June 24, 2010.	<u>MARCH 2011</u>								

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
DECEMBER 31, 2010

Attachment

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
		<p>A second Workgroup meeting was held on August 29, 2010. The SSI Advocates exchanged valuable tips on how to resolve non-disability SSI eligibility issues. We are currently drafting a document to show how non-disability issues may be addressed. This document will be shared with DPSS line staff.</p> <p>Document was drafted and presented during Workgroup meeting on December 2, 2010. The Workgroup provided valuable input. A document is in the process of modification to reflect the Workgroup's input. Document is to be part of GR SSIMAP Handbook.</p>	IMPLEMENTED AUGUST 2010
40	<p>Strengthen existing relationships with the Social Security Administration.</p>	<p>An upper level management meeting with the Social Security Administration, Veterans Administration, CEO and various County Departments was held on June 22, 2010. The purpose of the meeting was to stress the importance of collaboration among departments for the successful implementation of the GR Restructuring projects.</p>	IMPLEMENTED AUGUST 2010
41	<p>Implement a transportation pilot project to evaluate the impact of providing monthly bus passes to two groups of GR participants to determine whether providing bus passes (instead of individual tokens) increases their likelihood of approval for SSI:</p> <ol style="list-style-type: none"> 1. GR participants pursuing SSI, and 2. GR participants receiving a housing subsidy and pursuing SSI. <p>The pilot will consist of 200 GR participants. Each participant will contribute \$10 per month toward the cost of the bus pass.</p>	<p>A meeting with the responsible workgroup to discuss the project's course of action was held on June 24, 2010.</p> <p>A second workgroup meeting was held on September 22, 2010, to review the draft guidelines for the pilot.</p>	<p>A third workgroup meeting was held on December 7, 2010 to determine the District Offices for the pilot and the method of issuance for the pilot. A fourth meeting was held in January 2011 to determine the valid survey reports needed and logistics of implementation based on availability of monthly bus pass issuance from the Transit Access Pass card program that the Auditor-Controller is negotiating with the Los Angeles</p>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
DECEMBER 31, 2010

Attachment

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
	<p>Results will be compared after one year of the pilot. If providing bus passes is shown to be a good method of helping participants obtain approval of SSI benefits more quickly, DPSS will then explore ways of providing them to more participants.</p>	<p>Metropolitan Transportation Authority.</p>	
<p>42</p> <p>Reconstitute the GR Restructuring Workgroup as the GR Restructuring Steering Committee to meet quarterly to do the following:</p> <ul style="list-style-type: none"> ▪ Work together on the implementation process; ▪ Review evaluation data and make recommendations for any adjustments to processes or targets; and ▪ Identify and pursue opportunities for GR service integration. <p>(Updated 2/3/11)</p>	<p>All GR Restructuring Workgroup members were invited to be part of the specific workgroups for the individual recommendations.</p> <p>The first quarterly meeting of the GR Restructuring Steering Committee was held on July 27. The group was given a status update on each of the 42 recommendations.</p>	<p>IMPLEMENTED JUNE 2010</p>	

GR Quarterly Report – 02-22-11 - ATTACHMENT

Note: New updates are underlined



County of Los Angeles CHIEF EXECUTIVE OFFICE

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Fifth District

February 3, 2012

To: Supervisor Zev Yaroslavsky, Chairman
Supervisor Gloria Molina
Supervisor Mark Ridley-Thomas
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: William T Fujioka
Chief Executive Officer

GENERAL RELIEF RESTRUCTURING PLAN: QUARTERLY UPDATE

This is to provide a report on the progress of the implementation of the General Relief (GR) Restructuring Plan.

On April 24, 2009, on a motion by Supervisor Knabe, your Board instructed the Chief Executive Officer (CEO), in collaboration with the Department of Public Social Services (DPSS), and consultation with County Counsel, to design a potential GR Program that will better assist GR participants, with the expectation that more of these individuals would be able to transition off of County assistance. In response, the GR Restructuring Workgroup (RW), consisting of 11 County departments and ten stakeholders was convened. On February 9, 2010, your Board approved the comprehensive plan to restructure the GR Program. This plan consisted of 42 recommendations designed to reduce the GR caseload over time by focusing services on housing assistance, Supplemental Security Income (SSI) advocacy, and employment preparation.

The GR RW members were invited to participate in various workgroups that were convened by DPSS to assist in the implementation of the plan. Numerous internal DPSS meetings and meetings with other County departments and community stakeholders have taken place to discuss the implementation of the various GR restructuring projects. As a result of the great support and collaboration from the different partners, 19 GR Restructuring Recommendations have already been implemented and substantial progress has been made on numerous additional recommendations.

"To Enrich Lives Through Effective And Caring Service"

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Intra-County Correspondence Sent Electronically Only**

PERFORMANCE DATA ON KEY GR RESTRUCTURING PROJECTS

- Recommendation No 5. Expansion of the Housing Subsidy Project

The GR Housing Subsidy Program has a total of 1,540 slots. The slots will increase over time, as funding becomes available through the GR Anti-Homelessness Account. Currently, there are 1,332 individuals receiving a housing subsidy and 245 subsidies pending approval.

- Recommendation No. 8. Mental Health and Health Disability Assessments

Mental Health Assessments

Department of Mental Health (DMH) reported that in August, 2011, its clinicians saw 1,111 participants and determined that 1,036 of them have a mental health disability, of which 261 have a permanent mental health disability. This translates into 25 percent of individuals assessed as having a permanent mental health disability, compared to only 1.5 percent under the prior, more cursory mental health screening conducted by non-licensed DMH staff. This means that more GR participants are determined to be potentially eligible for SSI and provided SSI advocacy services. If approved for SSI, these individuals will exit GR. Through August 2011, DMH clinicians reported that a total of 8,688 participants have been seen. Of these, 8,296 have been determined to have a mental health disability, and 1,990 (or 24 percent) of these were determined to have a permanent mental health disability.

Physical Health Disability Assessments

The Physical Health Disability Assessment is a medical assessment of certain GR participants to determine their physical health and ability to comply with the GR Program employability requirements. These assessments are conducted by Federally Qualified Health Centers (FQHC).

FQHC reported that 18,014 GR participants had been seen through August 31, 2011. Of these, 672 were determined to be employable, 15,727 unemployable, 695 permanently unemployable, 880 employable with accommodations and 40 unemployable with accommodations.

- Recommendation No. 9. Record Retrieval Project

This project requires collaboration between DPSS, Department of Health Services (DHS), DMH, and the Los Angeles County Sheriffs' Department (LASD) to retrieve medical and mental health records on behalf of GR participants to support their

Each Supervisor
February 3, 2012
Page 3

disability claim for SSI. Since inception of the project in August 2010, DPSS has received a total of 1,443 sets of medical records from DMH, DHS and LASD.

- Recommendation No. 12. Enhancement of General Relief Opportunities for Work (GROW) Services

As of September 30, 2011, 20,538 individuals have been successfully placed on a job thanks to the GROW program. Of this number of job placements, 16,082 took place in FY 2010-11, and 4,456 in the first quarter of FY 2011-12.

- Recommendation No. 38. SSI Approval Targets

As of September 30, 2011, 10,440 individuals have been successfully approved for SSI due to the SSI Advocacy efforts. Of this number of SSI approvals, 4,456 were processed in FY 2010-11, and 2,060 in the first quarter of FY 2011-12.

An update on all 42 GR restructuring projects is provided on the attached GR Restructuring Master Implementation Chart.

We will provide the next quarterly report for the period ended December 2011 in February 2012.

If you have any questions, or require additional information, please contact Antonia Jiménez at (213) 974-7365 or via e-mail at ajimenez@ceo.lacounty.gov.

WTF:AJ:DS
JB:ljp

Attachment

c: Executive Office, Board of Supervisors
County Counsel
Children and Family Services
Community and Senior Services
Health Services
Mental Health
Probation
Public Defender
Public Health
Public Social Services
Sheriff's Department

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

Attachment

No.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
1	Subject to applicable confidentiality requirements, use the Adult Linkages Project mechanism to identify the County service history of GR applicants/participants, so that applicants/participants can be offered services that take into account the totality of their individual circumstances.	<p>The Chief Executive Office (CEO) approved funding for the one-time cost implementation of this recommendation. CEO-SIB is currently working with SAS (contractor), DPSS, and County Counsel to develop the system that will be used by DPSS eligibility staff to access real time service utilization records for GR applicants/participants.</p> <p>On November 16, 2010, the Board of Supervisors approved the Enterprise Linkage Project (ELP), and an agreement with SAS Institute as the contractor for implementing this expansion of the Adult Linkages Project (ALP). A draft Master Memorandum of Agreement (MOA) between the CEO and the eight County departments, who will be sharing data for this project, was distributed for review and comments. Kick-off meeting was held on February 9, 2011.</p> <p>The ELP core Workgroup meets bi-weekly to discuss implementation of the project. ELP participating County departments were present at the initial kick-off Workgroup meeting. The ELP vendor (SAS) holds weekly conference calls with CEO and DPSS to provide updates and obtain clarification on the system design. Additionally, the MOA with the participating departments was executed on September 9, 2011. At this point, the Department of Children and Family Services' (DCFS) records, Adult Protective Services records from the Department of Community Senior Services (CSS), and juvenile probation records from Probation Department will be excluded from ELP due to legal issues with confidentiality. Only deidentified data from these departments will be included for purposes of data analysis and program design.</p>	<u>FEBRUARY 2012</u>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

Attachment

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
2	The County should develop an innovative service integration model that can support County departments, other governmental entities, and community partners in concurrently serving a shared clientele.	Research is still pending on this project.	<u>JUNE 2012</u>
3	<p>Increase integration of services between the Sheriff's Department and DPSS by:</p> <ul style="list-style-type: none"> A. Developing a plan to enhance the current County jail match to identify individuals who are incarcerated and have a linkage to GR benefits, to provide pre- and post-release services and SSI Advocacy that will assist with their re-entry into society. B. Assessing the DPSS/Sheriff's Homeless Release Project to determine its effectiveness. C. Implementing a review protocol to determine whether any outstanding warrants remaining on the GR/SSI applicant's record should be cleared, recalled or withdrawn. D. Ensuring that probation, parole, and other warrants that should have been satisfied by a GR/SSI applicant's stay in jail have been withdrawn or recalled. E. Appointing a liaison for individuals with outstanding warrants whom advocates and County employees can contact directly to: (1) inquire about the underlying reason and validity of a warrant and (2) assist the SSI advocate in "clearing up" the warrant. F. Referring disabled individuals exiting jail who apply for GR to a SSI advocate/liaison, in order to re-establish SSI benefits and work with agencies (i.e., probation, parole, public defender, courts, etc.) to recall existing warrants. G. Referring disabled individuals exiting jail who do not have SSI benefits to GR SSIMAP for benefits establishment. 	<p>The designated workgroup includes DPSS, Sheriff, Public Defender and a representative from the Public Social Services (PSS) Commission.</p> <ul style="list-style-type: none"> • Los Angeles Sheriff Department (LASD) has identified a Custody Assistant (CA) whose job is to ensure that all inmates being identified for this project are cleared through their system to ensure that warrants are resolved prior to the inmates' release. • DPSS and LASD are working to identify additional data fields for the jail match listing to ensure more matches. The Chief Executive Office (CEO), Service Integration Branch (SIB), has agreed to run the jail match on "Dataflux" software to see if matches can be enhanced. • CEO/SIB was successful in enhancing the jail match with new parameters used on Dataflux. DPSS will use the same parameters and test to see if results are as successful as CEO/SIB. • LASD/DPSS and CEO staff met with Social Security Administration (SSA) staff to clarify SSA's role in this project. Per SSA, no SSA staff will be co-located at the jails; however, SSA will provide training to LASD's Community Transition Unit (CTU) in filling out SSI applications. • SSA provided training to LASD's Community Transition Unit in filling out the SSI application. 	<u>MARCH 2012</u>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

Attachment

No.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
4	<p>Encourage police agencies to make social services referrals for the homeless and connect them with resources, rather than issuing citations.</p>	<p>A meeting was held on June 17, 2010, with the Long Beach Police Department, L.A. County Sheriff's Department and Community partners.</p> <p>The Long Beach Police Department and LASD provided an overview of their services to the homeless population.</p> <p>At the April 2011 meeting with LASD/DPSS and CEO staff, a document that serves as a resource guide to homeless inmates in need of social services was introduced by LASD.</p> <p>LASD has confirmed that the resource guide is being distributed to homeless inmates as they are being released from jail.</p> <p>DPSS is waiting for confirmation from LASD that the resource guide will be given to homeless individuals instead of a citation.</p>	<u>MARCH 2012</u>
5	<p>Enhance Subsidized Housing by:</p> <p>A. Increasing the total number of housing subsidies to 10,000 by December 2014.</p> <p>B. Increasing the number of housing subsidies for homeless disabled GR participants pursuing, or willing to pursue, SSI and/or veterans benefits, so that 100% of homeless disabled GR participants pursuing SSI and/or veterans benefits are offered a housing subsidy.</p>	<p>The following key points were implemented in the Administrative Directive which was released to Project staff on August 2, 2010, for instructions and procedures:</p> <p>A. The GR Housing Subsidy Pilot has been expanded to include an additional 640 housing subsidy slots, bringing the total slots from 900 to 1,540. The current implementation plan projects to increase the housing subsidies based on the savings generated by GR participants who receive a housing subsidy and exit GR with work or disability benefits.</p> <p>B. & C. The new 640 housing subsidies added to the Pilot were allocated as follows: 320 for GR employable participants and 320 for GR disabled participants pursuing SSI and/or veterans benefits.</p>	<u>IMPLEMENTED AUGUST 2010</u>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

Attachment

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
5	<p>C. Increasing the number of housing subsidies for homeless, employable GR participants.</p> <p>D. As in the current GR Housing and Case Management Project:</p> <ul style="list-style-type: none"> a. Subsidized housing itself should not be time-limited, allowing people to stay as permanent residents, after they start receiving outside income and can pay for their housing. b. The housing subsidy should be encouraged, but not required. <p>E. Increasing the GR rental subsidy amount from \$300 to \$400 and reducing the participant's contribution from the grant from \$136 to \$100, so the total amount available for rent will be \$500.</p> <p>F. Pursuing federal reimbursements for housing subsidy payments made to employable GR participants through the Food Stamp and Employment Training (FSET) fund at a rate of 50%; and pursuing reimbursement for housing subsidy payment made to GR participants who are approved for SSI through the Interim Assistance Reimbursement Program, at a rate of 100%.</p> <p>G. Reinvesting the money recouped from SSI (Interim Assistance Reimbursement for housing subsidies) in additional housing subsidies.</p> <p>H. Recruiting participants for the Housing Subsidy and Case Management Program during the GR Intake process and making additional efforts throughout the course of case management to encourage participants to remain in the Housing Subsidy and</p>	<p>D. Incorporated in the implementation Administrative Directive.</p> <p>E. The GR Housing Subsidy amount was increased from \$300 to \$400 and the participant's contribution from the grant was reduced from \$136 to \$100. The new total amount available is \$500.</p> <p>F. & G. DPSS is internally working and has established procedures to pursue federal reimbursement for housing subsidy payments made to employable GR participants through FSET funding and to pursue reimbursement for housing subsidy payments made to GR participants who are approved for SSI through the IAR process. The money recouped from SSI will be reinvested in additional housing subsidies.</p> <p>H. Two training sessions were conducted on July 15, 2010, to provide Project Staff, intake and approved eligibility staff, GROW Case Managers and SSI Advocates with the new procedures on the expansion of the Housing Subsidy Pilot Program.</p>	

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

Attachment

No.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
5	Case Management Program and identify causes of participants dropping out of the subsidy.	<p>August 2, 2010, the final approved Administrative Directive was released and the expansion of the Housing Subsidy Pilot Program was implemented.</p> <p>The GR Housing Subsidy Program currently has a total of 1,540 slots.</p> <p>Currently, there are <u>1,332</u> individuals receiving a housing subsidy, of whom <u>1,090</u> are receiving the higher subsidy amount of \$400 which took effect in August 2010. The remaining <u>242</u> participants continue to receive the lower \$300 subsidy, because they began receiving the subsidy prior to August 2010.</p> <p>We recently learned of a decision by United States Department of Agriculture to limit FSET claiming for housing assistance to employable GR participants to <u>two</u> months per Federal Fiscal Year. As a result, the number of subsidies allocated to the GR employable category has been reduced from 50% of the total number of allocated subsidies to 25%. The current number of active GR employable subsidies as of September 30, 2011, is <u>454</u>. With the implementation of this change, project staff began suspending the approval of any new subsidies for this category until the total number of active subsidies is below the 25% allocation (<u>385</u>). The subsidies that become vacant due to disengagement are being allocated to the GR disabled participants pursuing SSI or Veterans Benefits.</p>	

PERFORMANCE DATA
As of September 30, 2011:

Total housing subsidy slots	<u>1,540</u>
Individuals receiving housing subsidy	<u>1,332</u>
Subsidies pending approval	<u>245</u>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

Attachment

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET DATE IMPLEMENTATION DATE
6	<p>Implement a pilot project (subject to a cost benefit analysis) by master leasing and/or purchasing foreclosed apartment buildings and/or multi-family housing units and/or dorm-like housing to be provided for the indigent homeless population. This housing should be owned and/or operated by a non-profit housing developer and/or homeless service provider with expertise in managing housing with services.</p> <p>Address supportive housing needs by:</p>	<p>Research is still pending on this project.</p> <p>We are developing a questionnaire to use with Board & Care facilities to inquire if they may be interested in master leasing. We have also requested an opinion from County Counsel on legal issues involved in master leasing.</p>	<u>JUNE 2012</u>
7	<p>A. Exploring housing options for mentally ill participants through City and County Housing Authorities and other smaller Housing Authorities throughout L.A. County.</p> <p>B. Identifying and leveraging County funding for housing resources and related services that already receive county funding or support.</p>	<p>A. DMH and DPSS staff held a pre-meet on April 27, 2010, to discuss possible housing experts and providers to be invited to assist with the implementation on this effort. A list of potential collaborative agencies was developed. The responsible workgroup met on June 24, 2010, to discuss the implementation plan for this project.</p> <p>A second workgroup meeting was held on August 4, 2010. A presentation on the Mental Health Services Act (MHSA) was made by Department of Mental Health (DMH) staff. Additionally, Los Angeles Homeless Services Authority (LAHSA) staff made a presentation on Project 50. MHSA, A Community of Friends and some local missions were identified as agencies that offer potential housing options to mentally ill GR participants who meet their criteria.</p> <p>B. Additionally, the group discussed the most viable projects and funding, which currently have housing slots available. All of the projects identified have limited funding. However, A Community of Friends, which is funded by the Community Development Commission (CDC), will be further explored.</p> <p>Project on target for implementation.</p> <p>DPSS is exploring partnership with Skid Row Housing Trust (SRHT). SRHT is a permanent supportive housing provider</p>	<u>MARCH 2012</u>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

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NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
7		<p>in downtown Los Angeles that currently operates 1,500 apartments, the majority of which are for homeless individuals.</p> <p>DPSS and DMH are collaborating to provide housing options for the mentally ill. The participants will be placed on the Housing Subsidy Program and the \$500 subsidy will be leveraged with Full Service Partnership (FSP) funding to provide housing, treatment, and services for these participants. DMH will provide 100 FSP slots for GR participants.</p>	<u>IMPLEMENTED ON</u> <u>JULY 2011</u>
8		<p>A CD containing a list of the entire GR caseload with dates of birth and Social Security numbers was provided to DMH on June 16, 2011. DMH staff compared this list with their list of individuals enrolled in a FSP slot looking for matches on both lists. In <u>August 2011</u>, DMH reported a total of <u>366</u> matches.</p> <p>Meetings were held with DMH and DHS regarding the implementation of the Disability Assessments/Comprehensive Evaluations.</p> <p><u>Mental Health Disability Assessment</u></p> <ul style="list-style-type: none"> • New mental health assessment training completed on October 28, 2010. • DMH staff began conducting the new mental health assessments on October 12, 2010, at Metro Special, Metro East, San Fernando, Pasadena and Wilshire Offices. • DMH will expand to all Districts on a staggered basis. • DMH submitted staff roll-out plan on October 5, 2010. • DMH reported that in <u>August 2011</u> its Clinicians saw <u>1,111</u> participants and determined <u>1,036</u> of them to have a mental health disability, of which <u>261</u> have a permanent mental health disability. This translates into <u>25.2%</u> of individuals screened having a permanent mental health disability compared to only 1.5% prior to 	

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	<p>implementation. This means that more GR participants are determined to be potentially eligible for SSI and provided SSI advocacy services. The reported numbers above are all from the new DMH mental health assessments and do not include the cursory NSA screenings done by DPSS Social Workers when there is a need for more assessments than can be completed by the available DMH licensed staff.</p> <ul style="list-style-type: none"> Through August 2011, DMH Clinicians reported that a total of <u>8,688</u> participants have been seen. Of these, <u>8,269</u> have been determined to have a mental health disability, and <u>1,990</u> (or 23.95%) of these were determined to have a permanent mental health disability. This compares to only 1.5% permanent designations prior to implementation. DMH completed hiring the 18 PSWs and was fully staffed by July 2011. 		

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		<ul style="list-style-type: none"> ○ San Gabriel Valley District #20 ○ Lancaster District #67 ○ Pomona (GROW site) • DMH has drafted the evaluation tool. • DMH has submitted an annual budget for the Comprehensive Evaluations for \$ 390,020, including two Clinical Psychologists and a <u>Staff Assistant</u>. • A Meeting was held on June 14, 2011 with Fiscal staff from DMH and DPSS, and DPSS GR Program staff to discuss the financial component of the comprehensive evaluations. • Revised budgets were submitted by DMH in August and September. DPSS is in the process of reviewing the budget. 	<p align="center"><u>IMPLEMENTED MAY 2011 (DISABILITY ASSESSMENTS)</u></p> <p align="center"><u>Medical Disability Assessment/Comprehensive Evaluations</u></p> <p>Subsequent to the Board's approval of this recommendation, the County Counsel for DHS determined that the medical disability assessments fall outside of the scope of the existing contracts with DHS' Public Private Partners (PPPs) and thus, neither the medical disability assessments nor the comprehensive evaluations can be implemented through an amendment to current PPP contracts.</p> <p>DPSS released a Request For Information (RFI) in an effort to identify Federally Qualified Health Centers (FQHC) and/or FQHC-look-alikes to provide the Medical Disability Assessment/Comprehensive Evaluations Services. Nine agencies were identified as having interest in providing Medical Disability Assessment Services/Comprehensive Evaluations to the fourteen GR Districts starting May 16 for a 19-month period. A competitive procurement process will be initiated during 2011 to secure one or more ongoing contractors beginning in December 2012.</p> <ul style="list-style-type: none"> • Board letter seeking delegated authority to execute

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8		<p>contracts with 9 FQHC was approved by the Board on April 12, 2011.</p> <ul style="list-style-type: none"> • Contracts were in May 2011. • Implementation of the Physical Health Disability Assessment began on May 16, 2011. • Implementation of the Physical Health Comprehensive Evaluation is targeted for March 2012. • The "Employable with Accommodations" designation was implemented in August, 2011. • DPSS is making modifications to the LEADER system to add the new employability types, which will be used by the disability assessment contractors. • DPSS and DHS met with the nine recommended Physical Disability Assessment/Comprehensive Evaluation Services providers on March 24, 2011, to discuss the transition plan, the draft assessment tool, scheduling capacity, and to address agency concerns. • Each agency has identified a liaison to work with DPSS staff on the revision and finalization of the disability assessment tool. The disability assessment tool workgroup met on Tuesday, March 29, 2011. The assessment tool is now finalized. <p>In the month of March 2011, the previous contractor, QTC, conducted a total of 11,306 cursory employability screenings, which yielded the following results:</p> <table> <tbody> <tr> <td>Employable</td> <td>571 (5.1%)</td> </tr> <tr> <td>Temporarily Unemployable</td> <td>10,629 (94%)</td> </tr> <tr> <td>Permanently Unemployable</td> <td>106 (0.9%)</td> </tr> </tbody> </table> <p><u>Number of Medical Disability Assessments provided by FQHC in August 2011:</u></p> <ul style="list-style-type: none"> • Number of patients seen: 7,758 	Employable	571 (5.1%)	Temporarily Unemployable	10,629 (94%)	Permanently Unemployable	106 (0.9%)	
Employable	571 (5.1%)								
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8	<ul style="list-style-type: none"> • Number determined Employable: <u>214</u> • Number determined Temporary Unemployable: <u>6,555</u> • Number determined Permanently Unemployable: <u>361</u> • Number determined Employable with Accommodations: <u>616</u> • Number determined Unemployable with Accommodations: <u>12</u> <p><u>As of August 31, 2011, total cumulative number of Medical Disability Assessments provided by FQHCs:</u></p> <ul style="list-style-type: none"> • Number of patients seen: <u>18,014</u> • Number determined Employable: <u>672</u> • Number determined Temporary Unemployable: <u>15,727</u> • Number determined Permanently Unemployable: <u>695</u> • Number determined Employable with Accommodations: <u>880</u> • Number determined Unemployable with Accommodations: <u>40</u> 	<p>The cumulative number of participants determined to be unemployable with accommodations is artificially low; this category was not fully implemented until August 2011. Therefore, for <u>August 2011, 616 (7.9%)</u> of participants were assessed as employable with accommodations and <u>880 (4.9%)</u> in the cumulative data.</p>	

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9	DHS, DMH, and LASD to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI. Most of the costs will be funded with 50% new federal revenue.	<ul style="list-style-type: none"> • Project protocols were released and SSI Advocacy staff were trained. DPSS continues to meet with DMH, DHS and LASD to clarify issues, exchange best practices and measure the progress made. • DHS has finalized hiring all seven Registered Nurses (RNs). DMH has hired both of its RNs. LASD has now hired a permanent RN to work in this project. • A comprehensive training for RNs was conducted on August 13, 2010. Training presenters included staff from SSA, DDS and DHS. • The project was implemented in August 2010. • DHS, DMH and LASD are now processing pre-clearance requests and retrieving medical and mental health records. • DMH conducted training on documenting mental health conditions for DHS/DPSS/LASD/SSI staff and SSI Advocates on May 11 and June 2, 2011. • To help DMH clear its existing backlog, on June 2, 2011, DHS began sharing, on a temporary basis, one full-time equivalent nurse with DMH. • Expansion of the Record Retrieval Project to DPSS' disability health assessment and evaluation contracted providers is being considered. If feasible, DPSS will work with DHS to develop and implement this expansion. 	<u>IMPLEMENTED AUGUST 2010</u>

PERFORMANCE DATA

Records retrieved as of 09/30/11:

DHS

Requested - 923

Received - 831

DMH

Requested - 950

Received - 579

LASD

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9	<p>Requested - <u>345</u> Received - <u>196</u></p> <p>Total cumulative number of records requested <u>2218</u> Total cumulative number of records received <u>1,606</u> (72% of records requested).</p> <p>Total cumulative number of "Not Available" records <u>367</u> (17% of requests submitted).</p> <ul style="list-style-type: none"> • Total number of records pending: <u>245</u> (11% of records requested). 	<p>Preliminary teleconference meetings with DPSS, DMH and DHS were held in June 2010 to further discuss the data needs for this project.</p>	<p>The Project was implemented in September 2010 when DPSS provided SSI IAR listings to DHS and DMH dating back to 2007. DHS reported that it has collected \$1,499 in retroactive Medi-Cal payments as a result of this process for July 2010. DPSS is in the process of finalizing the File Transfer Protocol (ftp), which will allow the monthly SSI IAR reports to be shared electronically with DMH and DHS. Additional amounts have been identified by both departments but they continue working on the claiming process.</p> <p>IMPLEMENTED SEPTEMBER 2010</p>
10	<p>Maximize the claiming of retroactive Medi-Cal for GR participants who qualify for SSI and Medi-Cal.</p>	<p>DPSS is working with DHS to establish the secure FTP file share procedures. Effective June 2011, ESD has been successfully transmitting the SSI IAR Lists to DHS via Secure FTP. DHS has given confirmation that they have received the files. DMH has its own web-based secure file transfer site. DMH has created the accounts that allow DPSS to upload the data directly onto the DMH site. GR Program staff has successfully transmitted the SSI IAR list for June 2011.</p>	

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11	<p>Integrate the Public Defender (PD) into SSI Advocacy, where GR participants are already clients of the Public Defender and advocacy can be combined with clients' representation in court.</p>	<p>PD identified the Compton Courthouse as the location for this project. Staff has been selected. One DPSS SSI Advocate and one PD Psychiatric Social Worker II will be collocated at the PD site to provide SSI Advocacy services. A workgroup meeting was held in November 2010. <u>The fiscal provisions of the MOU were revised, the document was signed by PD and it is pending DPSS Director's signature. The Administrative Directive is being finalized.</u> Project protocols and equipment installation were completed. Project was implemented as planned on August 31, 2011.</p>	<u>IMPLEMENTED AUGUST 2011</u>
12	<p>Modify the GROW Program to:</p> <ol style="list-style-type: none"> A. Customize services to individuals who are classified as: <ol style="list-style-type: none"> 1. Transitional Age Youth (TAY); 2. Veterans; and 3. Participants exiting Mandatory Substance Abuse Program (MSARP). 	<p>A.1. The implementation plan for this project was finalized by the workgroup. Items that were finalized include GROW Computer Programming changes; curriculum for specialized job club class by LACOE; and instructions to staff. Two new GROW components were implemented in January 2011 to address the special needs of TAY participants: a specialized job club for TAY participants is currently offered as a pilot at Southwest Special GROW site Pathways to Success (PTS) and a new Computer Applications Class (CAC) for TAY with basic computer skills is offered at Metro Special GROW site. Expansion to other GROW sites is targeted for October 11, 2011.</p> <p>During this quarter, 46 participants enrolled in PTS and 22 (48%) were placed in jobs. Thirteen participants enrolled in CAC, and 4 (31%) were placed.</p>	<u>IMPLEMENTED JANUARY 2011</u>

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12	<p>Implementation date for this project has been extended to November 2011. An informational flyer regarding potential services/benefits to Veterans is being developed.</p> <p>A.3. Computer enhancements and implementation plan for this project have been completed. This project was implemented in June 2011. With the implementation of this project, Fastrak services (specialized job skills preparation class) are now available to MSARP participants. Effective September 2011, two reports were generated to help GROW staff identify participants who have completed the Mandatory Substance Abuse Recovery Program (MSARP) for enrollment in other GROW activities.</p> <p>B & C. Projects 12 B&C were implemented on August 2, 2010, with limited services. During the interim phase of this project, seven NSA participants have located employment.</p> <p>At the present time, 28 participants are enrolled as volunteers, and 7 (25%) have found employment.</p> <p>An Administrative Directive for projects B & C was prepared, and cleared in July 2011. Implementation of these projects at all 14 GR and GROW District Offices is targeted for November 2011.</p> <p>D. The workgroup has finalized the implementation plan for this project. Policy and procedures for this project have been cleared and project was implemented on June 1, 2011. With the implementation of this project, GROW staff is now developing customized employment plans to meet the special needs of DCFS and Probation</p>	<p>IMPLEMENTED JUNE 2011</p> <p>PARTIALLY IMPLEMENTED AUGUST 2011</p>	

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12	<p>E. Develop a comprehensive and ongoing evaluation plan of GROW to track outcomes for GR participants, including, but not limited to, education and training outcomes, length of employment obtained through GROW, and recidivism.</p>	<p>referred youth. Collaboration between DPSS, DCFS and Probation was implemented in June 2011. With the implementation of this project, GROW staff is now developing customized employment plans to meet the special needs of DCFS and Probation-referred youth.</p> <p>E. An internal DPSS meeting took place in April 2010. Future follow-up meetings will be scheduled after the implementation plans have been further developed, in order to determine the best way to track relevant information.</p>	<u>IMPLEMENTED</u> <u>JULY 2011</u>
13	<p>Establish collaboration between DPSS and the Probation Department to reduce the number of Emerging Adults (age 18-24) applying for GR benefits.</p>	<p>DPSS has established collaboration with DCFS and Probation Department to facilitate referrals to GROW services, including American Recovery and Reinvestment Act (ARRA) Projects. DPSS has designated a liaison to work with both departments on this effort. This project was completed in May 2010.</p>	<u>IMPLEMENTED</u> <u>MAY 2010</u>
14	<p>Pursue federal reimbursement through FSET, at a rate of 50%, for mental health, domestic violence, and, to the extent possible, substance abuse services provided to GROW participants.</p>	<p>The DPSS plan that was submitted to the State was approved on May 5, 2010. Reimbursement through FSET for costs associated with support services to GROW participants can be claimed effective October 2009. This project was completed in May 2010.</p>	<u>IMPLEMENTED</u> <u>MAY 2010</u>
15	<p>Establish collaboration with CSS, L.A. City and all other Workforce Investment Boards to provide job services and employment opportunities through the Work Source Centers, geared toward both youth and adult GROW participants.</p>	<p>The workgroup for this project has been meeting monthly to develop a collaborative plan to provide comprehensive employment services to GROW participants. The following WorkSource Centers and One Stops want to participate in this project: The Gardena South Bay One-Stop Business & Career Center, Inglewood South Bay One-Stop Business & Career Center, Southeast Los Angeles County Workforce Investment Board Youth Center, Southeast Los Angeles County Workforce Investment Board Youth Center, Southeast Los Angeles Crenshaw WorkSource Center, Marina Del Rey</p>	<u>IMPLEMENTED</u> <u>FEBRUARY 2011</u>

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15	WorkSource Center, East Los Angeles WorkSource Center, Florence-Firestone WorkSource Center, and Los Angeles WORKS.	<p>DPSS and the Department of Community and Senior Services (CSS) are working on recruiting Workforce Investment Act (WIA) agencies that can provide services to participants residing in the San Fernando and Antelope Valley areas of the County.</p> <p>Two hundred seventy-one participants have been referred to the participating WIA agencies. Out of the 271 referred, 120 are enrolled in work preparation programs. Twenty-seven of the enrolled participants were offered employment and accepted.</p>	<p>DPSS has informed the responsible workgroup of this project and there were no objections to this proposal.</p>
16	Expand GROW to include GED preparation.	DPSS finalized policy/procedures to implement a GED component for GROW participants who lack a high school diploma. A list of available education entities has been identified. Programmatic changes to MAPPER have been completed.	IMPLEMENTED JUNE 2010
17	<p>Conduct a comprehensive study of the Mandatory Substance Abuse and Recovery Program (MSARP) to evaluate its effectiveness.</p> <p>A. DPSS and DPH-ADPA will evaluate the redesign of MSARP based upon the results of the evaluation.</p> <p>B. Use the evaluation outcomes and DPH-ADPA Rate Study to inform a resolicitation process for GR services.</p> <p>C. Evaluate the need for substance abuse treatment services for emerging adults ages 18-24 and the need to design specialized treatment services for this population.</p>	<p>CEO-SIB staff has shared a draft report, which was discussed during a meeting with DPSS staff. The data match with DPH was completed and merged with DPSS data in preparation for analysis. CEO-SIB conducted the analysis and submitted the draft report for review. DPSS provided comments and CEO-SIB finalized the report. Filing of the final report to the Board, initially scheduled for November 2011, has been postponed. The report will be submitted to DPSS in January 2012.</p>	FEBRUARY 2012

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18	Develop State and federal legislative/regulatory proposals to assist indigent adults and/or mitigate County costs and work with stakeholders to develop these proposals.	DPSS is examining possible areas where legislative and regulatory changes may be necessary and feasible. The workgroup has identified ten (10) potential concerns that with further research may formulate into a State or federal legislative proposal for indigent adults. The last workgroup meeting was held on November 23, 2010.	MARCH 2012
19	DPSS to expand data collection for the GR Program.	A meeting to discuss data collection and computer programming for all SSI Advocacy-related recommendations was held on June 22, 2010. GR data, including GR Restructuring Data, will be collected and made available through DPSSMART, SSIMAP database. Data collection is an ongoing effort.	IMPLEMENTED AUGUST 2010 Ongoing
20	Include the GR Program in the County's and DPSS' strategic plans.	<p>The GR Program has been incorporated in the County's and DPSS' Strategic Plan.</p> <p>The County's Strategic Plan Objectives are:</p> <p>Objective 2: General Relief to SSI: By June 30, 2010, assess the success of the implementation of the GR-to-SSI project, working with the Department of Public Social Services, Health Services, Mental Health, and Public Health staff. Based upon the evaluation, determine whether to continue program and/or integrate with GR Efficiencies Initiative.</p> <p>Objective 3: By June 30, 2010, to achieve GR Efficiencies, develop recommendations with stakeholders, present plan to the Board of Supervisors, and begin project implementation.</p>	IMPLEMENTED APRIL 2010

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21	Conduct a pilot having the current Linkages GAIN Services Workers at two or three small DCFs offices work with the Children's Social Workers to utilize the Transition Conference as an opportunity to connect foster youth with County services.	The workgroup has finalized the implementation plan for this project. Policy and procedures have been released for clearance. This project was implemented in June 2011.	<u>IMPLEMENTED</u> <u>JUNE 2011</u>
22	Provide better screening for Veterans and better referrals for assistance with claims and strengthen DPSS case management for Veterans who are on GR to enable them to qualify faster for Veteran's benefits and services.	<p>An initial meeting was held in June 2010 with Legal Aid Foundation of Los Angeles (LAFLA), Public Counsel, and Department of Military and Veterans Affairs (DMVA). Project protocols for the DPSS/LAFLA pilot have been drafted and shared with the responsible workgroup. Comments were received from the workgroup in June 2010.</p> <p>Currently working with Public Counsel to develop a resource guide for Veteran participants.</p> <p>A second meeting was held on August 17, 2010, with LAFLA to discuss the implementation of the pilot project. The DPSS/LAFLA Veterans pilot has been implemented in the Metro East office. Space arrangements for LAFLA staff at the Metro East office have been made. Policy for this project was officially released in December 2010.</p> <p>A telephone conference call was held on December 20, 2010 between DMVA and DPSS to discuss the next steps to implement the project.</p> <p>A conference call was held with DMVA's information technology vendor to discuss the feasibility of a data match. DMVA uses a vendor to host their database.</p> <p><u>Legal clarification is being sought to determine if a data match is legally feasible with DMVA and if an MOU will resolve the issue.</u> The data match with DMVA would only be able to identify participants who are already receiving veterans disability benefits.</p>	<u>PARTIAL</u> <u>IMPLEMENTATION</u> <u>DECEMBER 2010</u> <u>FULL</u> <u>IMPLEMENTATION</u> <u>MARCH 2012</u>

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22		<p>Additionally, the CEO-SIB is working with the federal Department of Veterans Affairs (VA) and has provided DPSS their VA contact information to discuss the feasibility of a data match to assist in the identification of Veteran GR participants. We have been in contact with the VA, and have been informed that a participant's Social Security Number is needed for a data match. County Counsel has indicated that unless we have the participant's consent, we cannot use their Social Security number for the data match. We are exploring other options.</p>	
23	<p>Assess and enhance the current mechanisms designed to enable former foster care youth, medically indigent under 21 and probation youth to receive and retain Medi-Cal.</p>	<p>An internal meeting was held on May 25, 2010, to discuss current DPSS efforts on this subject.</p> <p>Foster Care Youth</p> <p>Children in foster care automatically continue on Medi-Cal until they reach age 21; however, 50% of cases are terminated at redetermination for failure to respond, mainly due to DPSS not having the individuals' current address.</p> <p>DPSS and DCFS have established a liaison to share address changes reported by the youth and thereby update their databases. Additionally, DPSS is in the process of finalizing a change of address card for former foster youth to mail to DPSS to report a change of address. DPSS is also considering the inclusion of information regarding the Your Benefits Now (YBN) Online Application on the card. When implemented, the change of address card will be sent to DCFS and the Independent Living Program (administered by DCFS) to include in the packet of information given to the youth when exiting the program.</p>	<u>NOVEMBER 2011</u>

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23	<p>After further discussion with DCFS, it was decided not to proceed with the change of address card. DCFS expressed that the card would be another price of paper that the youth would discard.</p> <p>We are now pursuing utilizing electronic means such as twitter, to keep in touch with Former Foster Youth. Additionally, we are in the process of adding the Medi-Cal redetermination form to Your Benefits Now (YBN). This will allow the former foster youth to submit the redetermination online.</p> <p>DPSS meets with DCFS monthly to identify issues, concerns, and enhancements to the current process.</p> <p>Probation Youth</p> <p>DPSS is currently taking Medi-Cal applications at probation camps only for minor consent services (Medi-Cal for individuals who need continuous services; e.g., pregnancy, mental health treatment, counseling, drug and alcohol abuse).</p>	<p>A sub-workgroup meeting was held on January 10, 2011, to obtain a status update on enhancements being made to ensure former foster youth retain Medi-Cal. DPSS continues to work with Probation to establish a referral system to ensure probation youth are properly coded to receive and retain Medi-Cal.</p> <p>DPSS completed a computer data interface system with Probation (Medi-Cal Application and Probation Partnership System - MAPPS) to identify youth who are soon to be released from the probation system. MAPPS will allow Probation to input essential information about the Probation Youth into the system that will trigger a Medi-Cal pre-release referral to DPSS. However, due to resource issues, Probation is currently unable to provide</p>

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23	sample data to test the data interface system between DPSS and Probation. The system must be tested prior to implementation. As a result, MAPPS screens have been modified to allow Probation to enter information into the system. Data will be input manually until Probation can transmit the data electronically. An Administrative Directive releasing instructions to staff has been drafted and is in the clearance stage.		MARCH 2012
24	<p>Increase the GR Participants resources by:</p> <p>A. Allowing GR recipients to remain on GR while saving more money. Permit GR participants to maintain a Restricted Savings Account up to a pre-determined amount for the purpose of saving for housing, education or training expenses, and/or to start a business that would not be countable towards the property limit.</p> <p>B. Helping participants who have child support obligations by:</p> <ol style="list-style-type: none"> Educating workers and participants about the assistance DPSS currently offers to help lower child support payments for participants. Work with the Child Support Services Department to reduce child support payments for participants after they leave GR for the first six months they have a job, to allow them to get on their feet before resuming higher child support payments. 	<p>A. Research is still pending on the viability of implementing this segment.</p> <p>B.1. Draft protocols will be developed to educate DPSS staff on assisting GR participants with lowering their child support payments.</p> <p>B.2. At a meeting on October 11, 2011, DCSS indicated that this recommendation is in conflict with Federal and State rules which state that child support is collected based on the individual's earnings/income; therefore, this recommendation will not be pursued.</p>	
25	Add positions in GR offices, through September 30, 2010, utilizing TANF emergency contingency funds (ECF), to assist GR participants navigate the GR process. Positions may be filled with GR non-custodial parents (NCPs) who qualify for ECF-funded subsidized employment.	This project was completed with the hiring of six participants who worked as Customer Services Assistants (CSAs) in the GR Districts lobby until September 30, 2010, when the available funding ended.	IMPLEMENTED MAY 2010

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26	CEO-SIB to conduct an evaluation of GR Program mandates, rules, time limits, sanctions, operational processes, and data limitations, including a cost/benefit analysis.	<p>CEO-SIB identified two contractors to conduct the evaluation of the GR Program. The first contractor secured to perform the Quantitative Process Analysis of Los Angeles County's GR Program is University of Sciences in Philadelphia.</p> <p>The second contractor secured to perform the Qualitative Process Analysis of Los Angeles County's GR Program is Linda Shaw, Ph.D., from California State University San Marcos. An action plan was developed by the contractors to convene focus groups to interview Eligibility Workers and Administrative staff. These focus groups were convened in August 2010. Researchers convened focus groups and interviewed GR participants in January 2011.</p> <p>CEO-SIB researchers conducted the third part of the study themselves, a comparison of GR program policies in Los Angeles and several other California counties.</p> <p><u>These reports are being finalized, prior to submission to the Board.</u></p>	FEBRUARY 2012
27	Establish a GR Anti-Homelessness Account in the CEO's budget to fund enhanced services to reduce GR homelessness. Fund this account with savings from enhanced GR services, including but not limited to GR grant savings for participants who receive a rental subsidy and secure employment/SSI, and Interim Assistance Reimbursement for rental subsidies for GR participants who qualify for SSI.	The Anti-Homelessness Account was set up in the DPSS Assistance budget in August 2010.	IMPLEMENTED AUGUST 2010

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28	<p>Assist GR participants manage their money better by:</p> <ul style="list-style-type: none"> ▪ Formulating a list of banks that allow recipients to establish accounts with no minimum balances and minimal overdraft fees. ▪ Assembling training materials instructing clients about budgeting and money management as well as the security advantages of keeping their funds in a bank account. The instruction topics would also include balancing their check book, if utilizing an ATM to check their account status, and avoiding bank fees. ▪ Focusing on providing this information to GR participants securing SSI benefits. ▪ Engaging with community organizations involved with assisting individuals with money management issues. ▪ Seeking volunteer agencies who will offer training or assistance to GR participants on money management. 	<p>Three workgroup meetings have been conducted to brainstorm and develop an implementation plan. Met with representatives from a local bank to learn what they can offer to GR participants and what training they can provide to Supplemental Security Income Medi-Cal Advocacy Program (SSIMAP) staff. A focus group meeting was conducted with SSI Advocates on August 19, 2010, to better define their role under this recommendation.</p> <p>Money management training for SSIMAP staff was conducted by Consumer Action in October 2010. An Administrative Directive was completed and sent for clearance. The clearance process is being brought to a close. Full implementation is scheduled for October 2011. Once fully implemented, GR SSIMAP Advocacy staff will be able to counsel their participants on money management issues, help them create a budget and a spending plan.</p>	<u>OCTOBER 2011</u>
29	<p>Do not limit the housing subsidy to nine months for employable GR participants. Instead, permit employable GR participants who reach the nine-month time limit to continue receiving the subsidy during the three months that they are ineligible to GR.</p>	<p>A LEADER Change Request has been initiated to allow employable GR participants to receive housing subsidy after they reach the nine-month time limit.</p>	<u>JUNE 2012</u>
30	<p>DPSS should engage in a dialogue with Board and Care Operators to determine how to increase usage of board and care facilities by homeless GR participants. Explore providing information to GR participants on board and care facilities upon release from emergency rooms or hospitals.</p>	<p>A meeting with two Board and Care agencies to discuss other housing options for homeless GR participants took place on June 23, 2010.</p>	<u>MARCH 2012</u>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

Attachment

No.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
30	<p>Board and Care Operators are interested in providing housing to homeless participants. Board and Care operators will be provided information about the need for housing for GR homeless individuals and the opportunity to collaborate with DPSS. The CEO has taken the lead on this project.</p>		DECEMBER 2011
31	<p>Improve upon DPSS' GR SSI and Medi-Cal Advocacy Program (GRSSIMAP) by:</p> <ol style="list-style-type: none"> 1. Advocating for a change in federal regulations that would extend the protected filing date from 60 days to as many as 365 days, to increase the period of time during which the County could secure Interim Assistance Reimbursement for GR grants/rental subsidies and retroactive Medi-Cal. 2. Customizing the approach to securing SSI based on the condition and available documentation for individual GR participants by: <ul style="list-style-type: none"> • Better identifying GR participants who are potentially eligible for SSI through a more extensive medical and/or mental health disability assessment (approved in Phase One). • Evaluating available medical treatment documentation and utilizing the document retrieval process (approved in Phase One), if necessary. 	<p>1. Preliminary discussions have taken place with the local Social Security Administration (SSA) regarding the protected filing date. A conference call was held with SSA, the State Disability Determination Services Division (DDSD) and DPSS in August 2010. At a meeting in March 2011 between SSA, the State Disability Determination Services Division (DDSD) and DPSS, SSA stated that it would not be possible to change the protective filing date. Based on that response from the local SSA, DPSS will resume efforts to pursue a change at the federal level.</p> <p>2. The responsible workgroup met on November 18, 2010, to discuss customizing the approach to securing SSI based on available documentation. A focus group comprised of community and SSI Advocates <u>met in July 2011</u> to review and provide input on a new approach to define guidelines for the SSI Advocates to pursue SSI based on available documentation.</p> <p>See update for Recommendation #8.</p> <p>See update for Recommendation #9.</p>	<p>DECEMBER 2011</p> <p>NOVEMBER 2011</p>

Note: New updates are underlined.

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

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No.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
31	<ul style="list-style-type: none"> • Evaluating whether a comprehensive medical/mental health evaluation (approved in Phase One), and the resulting write-up would strengthen the SSI application, and, if so, refer the participant for an evaluation. • Making an appropriate decision about when to file the SSI application in order to increase the chance of approval, based on the participant's situation and the results of any assessments, medical documentation, and/or evaluation. 	<p>The responsible workgroup met on November 18, 2010. A meeting with a focus group comprised of community and SSI Advocates <u>was held in February 22, 2011, to review a new approach for the development of a GR SSIMAP Handbook to define guidelines for the SSI Advocates. A follow-up meeting will be held in December 2011 to finalize the GR SSIMAP Handbook.</u></p> <p>3. SOAR training has been completed. The last SOAR training session was held on September 30, 2010.</p> <p>4. SSA committed to provide training to DPSS staff. <u>On September 27 and October 3, 2011, SSA/DDSD provided training to GR SSIMAP Advocates and Contractors' clinicians.</u></p> <p>5. See update for Recommendation #8.</p>	<u>IMPLEMENTED OCTOBER 2011</u> <u>PARTIALLY IMPLEMENTED OCTOBER 2010</u> <u>IMPLEMENTED MAY 2011</u>
32	<p>3. Implementing the SSI/SSDI Outreach Access and Recovery (SOAR) principles and strategies.</p> <p>4. Seeking training from Social Security Administration for DPSS SSI advocates on SSI medical disability standards and case development.</p> <p>5. Developing the disability assessment and evaluation tools in consultation with medical/mental health professionals and experienced SSI advocates.</p> <p>Provide ancillary expenses for showers, shoes, clothes, etc., for those pursuing SSI, including a motel voucher for the night before an SSI appointment with California Department of Social Services or Social Security Administration, when needed to enable the participant to arrive on time.</p>	<p>A preliminary meeting with an internal DPSS focus group comprised of DPSS SSI Advocates to discuss the different ways of implementing the recommendation was held on June 23, 2010. The responsible workgroup meeting with all partners to discuss the project's course of action was held on June 24, 2010.</p> <p>The workgroup met on September 22, 2010 and December 7, 2010 to review the draft guidelines. Training was held in January 2011. Guidelines were released in May 2011.</p>	

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

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NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
33	Collaborate with private medical facilities to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI as part of the current DPSS-DHS homeless release project.	<p>Numerous attempts have been made to meet with the Hollywood Presbyterian and White Memorial hospitals but due to scheduling conflicts, a meeting has not been scheduled. However, both hospitals expressed interest in this project and agreed to meet to hear more details about the project.</p> <p>An official invitation for the Hospital Association of Southern California (HASC) to participate on the Record Retrieval Project has been sent to HASC. In a preliminary conversation with HASC administration, HASC expressed interest in the project. DPSS is waiting to hear from HASC for a firm meeting date to discuss this project in more detail.</p>	<u>MARCH 2012</u>
34	<p>Assist GR participants applying for SSI benefits by:</p> <ul style="list-style-type: none"> ▪ Identifying GR participants who are in need of mental health treatment to secure medical documentation needed to secure SSI; ▪ Subject to funding, providing mental health treatment to those participants; ▪ Prioritizing mental health services for GR participants who need to pursue SSI; ▪ Documenting those who cannot be treated due to lack of funding; ▪ Ensuring cost recoupment from retroactive Medi-Cal; ▪ Assessing current procedures for providing mental health treatment to GR participants; and ▪ Recommending changes to better keep participants engaged in treatment. 	<p>The first meeting with the responsible workgroup to discuss the protocols for this project was held on June 23, 2010.</p> <p>A second workgroup meeting was held on September 7, 2010. DMH, DPH, and Advocate representatives were present. The group discussed the recommendation and how to identify the participants in need of treatment to secure SSI and the need to document those who cannot be treated due to lack of funds. Some suggestions were made, but the lack of available funding was a barrier. A third workgroup meeting was held in October 2010.</p> <p>An internal meeting was held with CEO, DPSS, DMH and DHS in March 2011.</p>	<u>JANUARY 2012</u>
35	DPSS SSI Advocates should provide case management that will help GR SSI applicants keep track of appointments.	A preliminary meeting with an internal DPSS focus group comprised of DPSS SSI Advocates was held on June 23, 2010, to discuss different ways of implementing the recommendation. The responsible workgroup meeting	<u>FEBRUARY 2012</u>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

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NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
35		<p>with all partners to discuss the project's course of action was held on June 24, 2010.</p> <p>The workgroup generated recommendations which are currently under review and will be released via the GR SSIMAP Handbook.</p>	
36	<p>Pursue a pilot to coordinate ongoing health and mental health treatment for GR participants pursuing SSI, dependent upon available funding.</p>	<p>A workgroup meeting was held on November 18, 2010 to redefine the scope of the recommendation. The recommendation was expanded to allow advocates to do more case management activities. The meeting resulted in identifying more case management activities. They will be incorporated into the GR SSIMAP Handbook. A follow-up meeting will be held in December 2011 to finalize the GR SSIMAP Handbook.</p> <p>The first meeting with the responsible workgroup to discuss the protocols for this project was held on June 23, 2010.</p> <p>The workgroup met again on September 7, 2010 to discuss pursuing the recommended pilot. The group discussed the lack of available funding and the possibility of a pilot in an area that has both a DHS health clinic and a DMH mental health facility in close proximity. A third workgroup meeting was held in October 2010.</p> <p>DPSS is exploring a partnership with Skid Row Housing Trust (SRHT). SRHT is a permanent supportive housing provider in downtown Los Angeles that currently operates 1,500 apartments, the majority of which are for homeless individuals.</p>	<u>JANUARY 2012</u>
37	<p>Strengthen current process to identify GR participants who were previously on SSI and prioritize SSI advocacy for them.</p>	<p>A preliminary meeting with an internal DPSS focus group comprised of DPSS SSI Advocates was held on June 23, 2010, to discuss different ways of implementing the recommendation. The responsible workgroup meeting</p>	<u>FEBRUARY 2012</u>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

Attachment

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
37		with all partners to discuss the project's course of action was held on June 24, 2010. DPSS is in the process of finalizing the guidelines for SSI Advocates. The responsible workgroup met on December 7, 2010. The <u>guidelines will be incorporated into the SSIMAP Handbook. A follow-up meeting will be held in December 2011 to finalize the GR SSIMAP Handbook.</u>	
38	Establish the following targets for SSI Approvals: 1. For SSI applications filed in FY 10/11 and ongoing, increase the SSI approval rate at the initial application level to at least 50% in FY 10/11, to at least 60% in FY 11/12, and to at least 70% in FY 12/13. 2. For the overall number of SSI approvals, increase the number of SSI approvals as follows: FY FY FY 2010-09 2011-12 2012-13 Baseline Target Target 5,891 6,400 6,900 7,400	The workgroup meeting to discuss different ways of accomplishing the targets for SSI approvals was held on June 24, 2010. After all of the GR recommendations are implemented, the Advocates believe that they will have additional tools to enhance services to participants and to assist with more complete applications being submitted to SSA for SSI approval. The SSI targets were reiterated in the GR SSIMAP bi-monthly Newsletter and at the SSI Advocates Quarterly meeting.	IMPLEMENTED JUNE 2010 AND ONGOING
39	Address/fix non-disability related SSI eligibility issues such as citizenship documentation, birth certificate, etc.	The responsible workgroup meeting with all partners was held on June 24, 2010. A second Workgroup meeting was held on August 29, 2010. The SSI Advocates exchanged valuable tips on how to resolve non-disability SSI eligibility issues. We are	FEBRUARY 2012

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

Attachment

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
39		<p>currently drafting a document to show how non-disability issues may be addressed. This document will be shared with DPSS line staff.</p> <p>Document was drafted and presented during Workgroup meeting on December 2, 2010. The Workgroup provided valuable input. A document is in the process of modification to reflect the Workgroup's input. Document is to be part of GR SSIMAP Handbook. A follow-up meeting will be held in December 2011 to finalize the GR SSIMAP Handbook.</p>	
40	<p>Strengthen existing relationships with the Social Security Administration.</p>	<p>An upper level management meeting with the Social Security Administration, Veterans Administration, CEO and various County Departments was held on June 22, 2010. The purpose of the meeting was to stress the importance of collaboration among departments for the successful implementation of the GR Restructuring projects.</p> <p>A meeting attended by SSA, Disability Determination Services Division (DDSD), and DPSS staff was held on August 21, 2010, to strategize ways of helping more GR Participants transition to SSI. The three agencies committed to collaborate with each other to meet their objective of increasing the number of SSI approvals among GR participants. Agencies agreed to meet quarterly to discuss progress made.</p>	<p>IMPLEMENTED AUGUST 2010</p>
41	<p>Implement a transportation pilot project to evaluate the impact of providing monthly bus passes to two groups of GR participants to determine whether providing bus passes (instead of individual tokens) increases their likelihood of approval for SSI:</p> <ol style="list-style-type: none"> 1. GR participants pursuing SSI, and 2. GR participants receiving a housing subsidy and pursuing SSI. 	<p>A meeting with the responsible workgroup to discuss the project's course of action was held on June 24, 2010. A second workgroup meeting was held on September 22, 2010, to review the draft guidelines for the pilot.</p> <p>A third workgroup meeting was held on December 7, 2010, to determine the District Offices for the pilot and the method of issuance for the pilot. A fourth meeting was</p>	<p>MARCH 2012</p>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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No.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
41	<p>The pilot will consist of 200 GR participants. Each participant will contribute \$10 per month toward the cost of the bus pass.</p> <p>Results will be compared after one year of the pilot. If providing bus passes is shown to be a good method of helping participants obtain approval of SSI benefits more quickly, DPSS will then explore ways of providing them to more participants.</p>	<p>held in January 2011 to determine the valid survey reports needed and logistics of implementation based on availability of monthly bus pass issuance from the Transit Access Pass card program that the Auditor-Controller is negotiating with the Los Angeles Metropolitan Transportation Authority.</p>	
42	<p>Reconstitute the GR Restructuring Workgroup as the GR Restructuring Steering Committee to meet quarterly to do the following:</p> <ul style="list-style-type: none"> ▪ Work together on the implementation process; ▪ Review evaluation data and make recommendations for any adjustments to processes or targets; and ▪ Identify and pursue opportunities for GR service integration. 	<p>All GR Restructuring Workgroup members were invited to be part of the specific workgroups for the individual recommendations.</p> <p>The first quarterly meeting of the GR Restructuring Steering Committee was held on July 27. The group was given a status update on each of the 42 recommendations.</p>	<p>IMPLEMENTED JUNE 2010</p> <p>The Workgroup continues to meet on a quarterly basis.</p>

(Updated 12/8/11)

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

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GR CASELOAD CHARACTERISTICS								
Month/Year	Total Aided Persons	% Change from Previous Month	Employable	Unemployable	Average Age		Male	Female
					E	U		
July	2010	101,683	40,244	61,439	33	43	67,576	34,107
August	2010	102,982	1.3%	41,087	61,895	33	43	68,395
September	2010	104,057	1.1%	41,380	62,677	33	43	68,997
October	2010	104,042	0.0%	40,919	63,123	33	43	69,088
November	2010	104,969	0.9%	40,145	64,824	33	43	69,695
December	2010	107,452	2.4%	44,242	63,210	33	43	71,520
January	2011	108,951	1.4%	45,452	63,499	34	43	72,534
February	2011	106,390	-2.4%	44,622	61,768	34	43	70,733
March	2011	109,212	2.6%	46,250	62,962	34	43	72,709
April	2011	109,305	.08%	47,930	61,375	34	43	72,885
May	2011	109,062	-22%	40,873	68,189	34	43	72,631
<u>June</u>	<u>2011</u>	<u>111,018</u>	<u>1.79%</u>	<u>43,431</u>	<u>67,587</u>	<u>33</u>	<u>43</u>	<u>73,886</u>
<u>July</u>	<u>2011</u>	<u>112,308</u>	<u>1.15%</u>	<u>46,692</u>	<u>65,616</u>	<u>34</u>	<u>43</u>	<u>74,516</u>
<u>August</u>	<u>2011</u>	<u>113,344</u>	<u>.92%</u>	<u>50,774</u>	<u>62,570</u>	<u>34</u>	<u>43</u>	<u>75,176</u>
<u>September</u>	<u>2011</u>	<u>112,898</u>	<u>-.40%</u>	<u>51,974</u>	<u>60,924</u>	<u>34</u>	<u>43</u>	<u>74,790</u>
								<u>38,108</u>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

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GR OUTCOMES					
Month/Year	JOB PLACEMENTS		SSI APPROVALS		Cumulative FY 2010/11
	Monthly	Cumulative FY 2010/11	Monthly	Cumulative FY 2010/11	
July	2010	1,234	1,234	598	598
August	2010	1,512	2,746	691	1,289
September	2010	1,562	4,308	639	1,928
October	2010	1,353	5,661	611	2,539
November	2010	1,303	6,964	664	3,203
December	2010	1,231	8,195	854	4,057
January	2011	1,115	9,310	671	4,728
February	2011	1,132	10,442	646	5,374
March	2011	1,389	11,831	691	6,065
April	2011	1,362	13,193	819	6,884
May	2011	1,354	14,547	865	7,749
June	2011	1,535	16,082	631	8,380

GR OUTCOMES					
Monthly	JOB PLACEMENTS		SSI APPROVALS		Cumulative FY 2011/12
	Cumulative FY 2011/12	Monthly	Monthly	Cumulative FY 2011/12	
July	2011	1,309	1,309	687	687
August	2011	1,584	2,893	794	1,481
September	2011	1,563	4,456	579	2,060

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

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SUCCESS STORIES	
<u>Recommendation</u>	<u>Success Story</u>
#5 - Expanded Housing Subsidy	<p>Mr. S was unemployed and homeless when he applied for the General Relief Housing Subsidy and Case Management Project (GRHSCMP). Mr. S was approved and found affordable housing through the Project. (ADD WHEN HE SECURED HOUSING) Mr. S was also actively engaged in the GROW Program, which assisted him with his goal to get back in the workforce. Mr. S was able to attend job training and he was also able to keep looking for jobs once he had a place to live. On 2/25/11, Mr. S contacted his Housing Case Manager (HCM) to express how excited he was because he had secured full-time employment as a truck driver on 2/28/11. He spoke with pride and gratitude of this employment with a starting salary of \$16+ per hour, plus benefits. Mr. S. is now self-sufficient.</p> <p>Mr. B was able to move into his own place in April 2010 with the assistance he received from the GRHSCMP. Mr. B had a history of being chronically homeless. The HCM provided intensive case management and assisted Mr. B to ensure he would not miss any of his SSI follow-up appointments. On 3/4/11, the GR HCM received a notice that Mr. B had been approved for SSI. Mr. B was very grateful for the good news and he expressed his gratitude for all of the help the Project had provided. Mr. B. has exited the GR Program since he has secured his federal disability benefits, which allow him to pay his own rent.</p>
#8 - Enhanced Disability Assessments and Evaluations	<p>Prior to his most recent physical assessment by St. John's Well Child A Family Center (JWCH), a County contractor, Mr. K. a GR participant, had been medically assessed and found to be temporarily disabled due to a bad back. However, Mr. K's latest medical assessment by the County contractor resulted in a diagnosis of schizophrenia, a condition that had not been identified previously. Consequently, Mr. K was referred for mental health treatment and SSI advocacy assistance through the GR program. Mr. K was very grateful to GR, medical and mental health staff for the thorough job they did and for identifying his condition which make him potentially eligible for SSI benefits.</p> <p>On October 5, 2011, JWCH, Inc. CEO shared that a participant came into their office that very morning for a disability assessment. As the disability assessment began, the examining physician asked him to remove his shirt. As the participant removed his shirt the physician said to the GR participant, "you have advanced AIDS." Participant replied, "I never wanted to know." They rushed him to a local hospital and he was entered into the ICU. Later, they followed-up on the status of the participant and JWCH staff were informed if this participant had not received treatment he would have died within the next three weeks. JWCH CEO stated, "so we are making a difference."</p>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART

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Attachment

SUCCESS STORIES	
<u>Recommendation</u>	<u>Success Story</u>
#12 – Enhanced Employment Services to Veterans	<p>Mr. B. is an older veteran who had overcome a substance abuse problem and other personal challenges in the past. He knew that he was trying to find employment in one of the toughest job markets, but he was extremely motivated and positive.</p> <p>Mr. B. informed his GROW Case Manager (GCM) that he had electronically applied for various positions through the Employment Development Department. Most of his experience was in carpentry and he wanted to focus on this field, but he also had experience as a Warehouse Driver and ended up applying for a Warehouse Driver position.</p> <p>During a GROW site visit, his GCM informed Mr. B. about a Groundskeeper Training Program at the Veteran's Administration (VA). The GCM also provided Mr. B. with a list of the 50 most common employment interview questions to enhance his interview skills.</p> <p>A few weeks later, Mr. B. told his GCM that he had been accepted to the VA Groundskeeper Training Program; he needed transportation and assistance with ancillary expenses. His GCM was very excited about Mr. B.'s success and issued transportation and ancillary payments.</p> <p>Mr. B. did very well in his training and as his graduation date approached, Mr. B. and his GCM looked forward to having the VA offer him a permanent position as a Groundskeeper.</p> <p>A couple of weeks later, Mr. B. informed his GCM's office that he was hired permanently as a Groundskeeper by the VA, and would be earning \$14.50 per hour with full benefits.</p>
#12 – Provide GROW Services to Volunteers	<p>When Mr. A. applied for GR at the Rancho Park District, he was assessed as unemployable, during the GR intake process. Therefore, he was exempted from participation in the GROW Program. However, during a conversation with his Eligibility Worker (EW), he mentioned that he wanted to work and requested assistance with finding employment.</p> <p>His EW informed Mr. A. about the new Volunteers for GROW Project, and with the assistance of the GROW Supervisor, Mr. A. was expeditiously enrolled in the GROW Program.</p> <p>Mr. A. was determined to find employment and under the guidance of his GCM, he started an intensive job search, which resulted in permanent full-time employment at the Panda Express restaurant.</p> <p>Mr. A. is no longer on GR and stated that he is very happy with his new job. He is an excellent example of a self-motivated GROW participant who took advantage of our caring GROW team and the exceptional services they provide.</p>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
September 30, 2011

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GROW PROJECTS
STATISTICAL INFORMATION

PROJECT NO.	GROW POPULATION	GROW COMPONENTS		NUMBER COMPLETED	NUMBER PLACEMENTS
		NUMBER REFERRED IN REPORTING QUARTER	NUMBER ENROLLED IN REPORTING QUARTER		
<u>12.A</u>	<u>TAY</u>				
	<u>Pathways to Success</u> <u>(Customized Job Club)</u>	86	46	58	25
	<u>Computer Application</u>	<u>14</u>	<u>13</u>	<u>15</u>	<u>8</u>
	<u>MSARP</u>	<u>209</u>	<u>243</u>	<u>236</u>	<u>273</u>
<u>15</u>	<u>WIA COLLABORATION</u>	<u>271</u>	<u>120</u>	<u>120</u>	<u>27</u>
<u>16</u>	<u>GED</u>	<u>146</u>	<u>125</u>	<u>182</u>	<u>49</u>
	<u>LITERACY</u>	<u>120</u>	<u>108</u>	<u>158</u>	<u>49</u>

PROJECT NO.	GROUP	PRIORITY POPULATION		
		NUMBER ENROLLED		
<u>12.A</u>	<u>VETERANS</u>	<u>196</u>		
<u>12.B/C</u>	<u>VOLUNTEERS</u>	<u>28</u>		<u>7</u>
<u>12.D</u>	<u>PROBATION TAY</u>	<u>1,297</u>		
<u>21</u>	<u>DCFS TAY</u>	<u>195</u>		

* Tracking on placements for these groups is under development. Target completion date is February 2012.



County of Los Angeles CHIEF EXECUTIVE OFFICE

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WILLIAM T FUJIOKA
Chief Executive Officer

March 22, 2012

Board of Supervisors
GLORIA MOLINA
First District

MARK RIDLEY-THOMAS
Second District

ZEV YAROSLAVSKY
Third District

DON KNABE
Fourth District

MICHAEL D. ANTONOVICH
Fifth District

To: Supervisor Zev Yaroslavsky, Chairman
Supervisor Gloria Molina
Supervisor Mark Ridley-Thomas
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: William T Fujioka
Chief Executive Officer

WFQH

GENERAL RELIEF RESTRUCTURING PLAN: QUARTERLY UPDATE

This is to provide a report on the progress of the implementation of the General Relief (GR) Restructuring Plan.

On April 24, 2009, on a motion by Supervisor Knabe, your Board instructed the Chief Executive Officer (CEO), in collaboration with the Department of Public Social Services (DPSS), and in consultation with County Counsel, to design a potential GR Program that will better assist GR participants, with the expectation that more of these individuals would be able to transition off of County assistance. In response, the GR Restructuring Workgroup (RW), consisting of 11 County departments and ten stakeholders, was convened. On February 9, 2010, your Board approved the comprehensive plan to restructure the GR Program. This plan consisted of 42 recommendations designed to reduce the GR caseload over time by focusing services on housing assistance, Supplemental Security Income (SSI) advocacy, and employment preparation.

The GR RW members were invited to participate in various workgroups that were convened by DPSS to assist in the implementation of the plan. DPSS conducted numerous internal meetings. In addition, our office conducted meetings with DPSS and other County departments and community stakeholders to discuss the implementation of the various GR restructuring projects. As a result of the great support and collaboration from the different partners, 23 GR Restructuring Recommendations have already been implemented, of which 19 are fully implemented. Substantial progress has been made on numerous additional recommendations.

"To Enrich Lives Through Effective And Caring Service"

**Please Conserve Paper – This Document and Copies are Two-Sided
Intra-County Correspondence Sent Electronically Only**

Each Supervisor
March 22, 2012
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PERFORMANCE DATA ON KEY GR RESTRUCTURING PROJECTS

- Recommendation No. 5 - Expansion of the Housing Subsidy Project (HSP)

The GR Housing Subsidy Program has a total of 1,540 slots. The slots will increase over time, as funding becomes available through the GR Anti-Homelessness Account. Currently, there are 1,216 individuals receiving a housing subsidy and 504 subsidies pending approval.

- Recommendation No. 8 - Mental Health and Health Disability Assessments

Mental Health Assessments

Department of Mental Health (DMH) reported that in December 2011, its Clinicians saw 1,311 participants and determined that 1,215 of them have a mental health disability, of which 341 have a permanent mental health disability. This translates into 28.1 percent of individuals assessed as having a permanent mental health disability, compared to only 1.5 percent under the prior, more cursory mental health screening conducted by non-licensed DMH staff. As a result, more GR participants are determined to be potentially eligible for SSI and provided SSI advocacy services; if approved for SSI, these individuals will exit GR. Through December 2011, DMH Clinicians reported that of the 13,270 participants seen, 12,560 have a mental health disability, and 3,207 (or 25.5 percent) of these have a permanent mental health disability.

Physical Health Disability Assessments

The Physical Health Disability Assessment is a medical assessment conducted by Federally Qualified Health Centers (FQHCs) for GR participants deemed employable.

As of November 30, 2011, FQHCs reported that 45,566 GR participants had been seen. Of these, 1,438 participants were determined to be employable and were referred to the General Relief Opportunities for Work (GROW) Program, 37,900 were temporarily unemployable, 1,404 are classified as permanently unemployable and were referred to SSI advocacy services, 4,770 employable with accommodations and 54 unemployable with accommodations and referred to the GROW Program. Individuals classified as "Temporarily Unemployable" will be reassessed once their temporary disability expires. Individuals classified as "Employable with Accommodations" are employable, but need certain accommodations in order to work or have certain limitations/restrictions in the type of

Each Supervisor
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work they can perform. Individuals determined to be "Unemployable with Accommodations/Restrictions" may volunteer to participate in GROW.

- Recommendation No. 9 - Record Retrieval Project

This project requires collaboration between DPSS, Department of Health Services (DHS), DMH, and Los Angeles Sheriff Department (LASD) to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI. Since inception of the project in August 2010, DPSS has received a total of 1,978 sets of medical records from DMH, DHS, and LASD. DPSS is currently working with Social Security Administration to determine the SSI approval rate.

- Recommendation No. 12 - Enhancement of GROW Services

From July 1, 2010 through December 31, 2011, 25,054 individuals have been successfully placed on a job through the GROW Program. Of this number of job placements, 16,082 took place in Fiscal Year (FY) 2010-11, and 8,972 in the first two quarters of FY 2011-12.

- Recommendation No. 38 - SSI Approval Targets

From July 1, 2010, through December 31, 2011, 12,284 individuals have been successfully approved for SSI due to SSI Advocacy efforts. Of this number of SSI approvals, 8,380 occurred in FY 2010-11, and 3,904 in the first two quarters of FY 2011-12.

An update on all 42 GR restructuring projects is provided on the attached GR Restructuring Master Implementation Chart (Attachment A). In addition, following the update of the 42 objectives are success stories from various projects. Furthermore, we have included an update on Recommendation No. 3 from the February 9, 2010 GR Restructuring Board Letter (Attachment B), which addresses development of a plan to integrate services for GR participants who are severely mentally ill, receiving a GR housing subsidy, and pursuing SSI.

We will provide the next quarterly report in May 2012.

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If you have any questions, or require additional information, please contact Antonia Jiménez at (213) 974-7365 or via e-mail at ajimenez@ceo.lacounty.gov.

WTF:AJ:DS
JB:SF:ljp

Attachments

c: Executive Office, Board of Supervisors
County Counsel
Children and Family Services
Community and Senior Services
Health Services
Mental Health
Probation
Public Defender
Public Health
Public Social Services
Sheriff's Department

GR Restructuring Plan-Quarterly Update-March 2012

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
December 31, 2011

Attachment A

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
1	<p>Subject to applicable confidentiality requirements, use the Adult Linkages Project mechanism to identify the County service history of GR applicants/participants, so that applicants/participants can be offered services that take into account the totality of their individual circumstances.</p>	<p>The Chief Executive Office (CEO) approved funding for the one-time cost implementation of this recommendation. CEO-SIB is currently working with SAS (contractor), DPSS, and County Counsel to develop the system that will be used by DRSS eligibility staff to access real time service utilization records for GR applicants/participants.</p> <p>On November 16, 2010, the Board of Supervisors approved the Enterprise Linkage Project (ELP), and an agreement with SAS Institute as the contractor for implementing this expansion of the Adult Linkages Project (ALP). A draft Master Memorandum of Agreement (MOA) between the CEO and the eight County departments, who will be sharing data for this project, was distributed for review and comments. Kick-off meeting was held on February 9, 2011.</p> <p>The ELP core Workgroup meets bi-weekly to discuss implementation of the project. ELP participating County departments were present at the initial kick-off Workgroup meeting. The ELP vendor (SAS) holds weekly conference calls with CEO and DPSS to provide updates and obtain clarification on the system design. Additionally, the MOA with the participating departments was executed on September 9, 2011. At this point, the Department of Children and Family Services' (DCFS) records, Adult Protective Services records from the Department of Community Senior Services (CSS), and juvenile probation records from Probation Department will be excluded from ELP due to legal issues with confidentiality. Only deidentified data from these departments will be included for purposes of data analysis and program design.</p> <p><u>The CEO continues to work with County Departments to collect service history data needed for ELP. The data is needed by SAS to start ELP User testing by the end of February or early March. An initial ELP user group has been identified</u></p>	<u>APRIL 2012</u>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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Attachment A

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
1	and scheduled for training the second week of February. The training will begin the process of collecting the ELP Authorization forms needed for ELP user testing. The ELP vendor, SAS, continues to design and finalize the ELP computer system based on the ongoing recommendations made by the ELP workgroup.	JUNE 2012	<u>MAY 2012</u>
2	The County should develop an innovative service integration model that can support County departments, other governmental entities, and community partners in concurrently serving a shared clientele.	Research is still pending on this project.	
3	<p>Increase integration of services between the Sheriff's Department and DPSS by:</p> <ul style="list-style-type: none"> A. Developing a plan to enhance the current County jail match to identify individuals who are incarcerated and have a linkage to GR benefits, to provide pre- and post-release services and SSI Advocacy that will assist with their re-entry into society. B. Assessing the DPSS/Sheriff's Homeless Release Project to determine its effectiveness. C. Implementing a review protocol to determine whether any outstanding warrants remaining on the GR/SSI applicant's record should be cleared, recalled or withdrawn. D. Ensuring that probation, parole, and other warrants that should have been satisfied by a GR/SSI applicant's stay in jail have been withdrawn or recalled. E. Appointing a liaison for individuals with outstanding warrants whom advocates and County employees can contact directly to: (1) inquire about the underlying reason and validity of a warrant and (2) assist the SSI advocate in "clearing up" the warrant. F. Referring disabled individuals exiting jail who apply 	<p>The designated workgroup includes DPSS, Sheriff, Public Defender and a representative from the Public Social Services (PSS) Commission.</p> <ul style="list-style-type: none"> • Los Angeles Sheriff Department (LASD) has identified that a Custody Assistant (CA) will ensure that all inmates being identified for this project are cleared through their system to ensure that warrants are resolved prior to the inmates' release. This will be done through the Community Transition Re-Entry Center. <u>The Community Transition Re-Entry Center, located at the Twin Towers, will provide resources to newly released inmates as they transition into the community.</u> • DPSS and LASD are working to identify additional data fields for the jail match listing to ensure more matches. The Chief Executive Office (CEO), Service Integration Branch (SIB), has agreed to run the jail match on "Dataflux" software to see if matches can be enhanced. <u>We are awaiting a LEADER modification to enhance the Jail Match and expect to implement the change by May 2012.</u> • CEO/SIB was successful in enhancing the jail match with new parameters used on Dataflux. DPSS will use the same parameters and test to see if results are as successful as 	

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
3	<p>for GR to a SSI advocate/liason, in order to re-establish SSI benefits and work with agencies (i.e., probation, parole, public defender, courts, etc.) to recall existing warrants.</p> <p>G. Referring disabled individuals exiting jail who do not have SSI benefits to GR SSIMAP for benefits establishment.</p>	<p>CEO/SIB. LASD/DPSS and CEO staff met with Social Security Administration (SSA) staff to clarify SSA's role in this project. Per SSA, no SSA staff will be co-located at the jails; however, SSA will provide training to LASD's Community Transition Unit (CTU) in filling out SSI applications.</p> <ul style="list-style-type: none"> • SSA provided training to LASD's Community Transition Unit in filling out the SSI application. 	
4	<p>Encourage police agencies to make social services referrals for the homeless and connect them with resources, rather than issuing citations.</p>	<p>A meeting was held on June 17, 2010, with the Long Beach Police Department, L.A. County Sheriff's Department and Community partners.</p> <p>The Long Beach Police Department and LASD provided an overview of their services to the homeless population.</p> <p>At the April 2011 meeting with LASD/DPSS and CEO staff, a document that serves as a resource guide to homeless inmates in need of social services was introduced by LASD.</p> <p>LASD has confirmed that the resource guide is being distributed to homeless inmates as they are being released from jail.</p>	<p>MARCH 2012</p>
5	<p>Enhance Subsidized Housing by:</p> <p>5</p> <p>A. Increasing the total number of housing subsidies to 10,000 by December 2014.</p>	<p>The following key points were implemented in the Administrative Directive which was released to Project staff on August 2, 2010, for instructions and procedures:</p> <p>A. The GR Housing Subsidy Pilot has been expanded to include an additional 640 housing subsidy slots, bringing the total slots from 900 to 1,540. The current implementation plan projects to increase the housing subsidies based on the savings generated by GR participants who receive a housing</p>	

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
December 31, 2011

Attachment A

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
5	<p>B. Increasing the number of housing subsidies for homeless disabled GR participants pursuing, or willing to pursue, SSI and/or veterans benefits, so that 100% of homeless disabled GR participants pursuing SSI and/or veterans benefits are offered a housing subsidy within five years.</p> <p>C. Increasing the number of housing subsidies for homeless, employable GR participants.</p> <p>D. As in the current GR Housing and Case Management Project:</p> <ul style="list-style-type: none"> a. Subsidized housing itself should not be time-limited, allowing people to stay as permanent residents, after they start receiving outside income and can pay for their housing. b. The housing subsidy should be encouraged, but not required. <p>E. Increasing the GR rental subsidy amount from \$300 to \$400 and reducing the participant's contribution from the grant from \$136 to \$100, so the total amount available for rent will be \$500.</p> <p>F. Pursuing federal reimbursement for housing subsidy payments made to employable GR participants through the CalFresh and Employment Training (CFET) fund at a rate of 50%; and pursuing reimbursement for housing subsidy payment made to GR participants who are approved for SSI through the Interim Assistance Reimbursement Program (IAR), at a rate of 100%.</p> <p>G. Reinvesting the money recouped from SSI (Interim Assistance Reimbursement for housing subsidies) in additional housing subsidies.</p>	<p>subsidy and exit GR with work or disability benefits.</p> <p>B. & C. The new 640 housing subsidies added to the Pilot were allocated as follows: 320 for GR employable participants and 320 for GR disabled participants pursuing SSI and/or veterans benefits.</p> <p>D. Incorporated in the implementation Administrative Directive.</p> <p>E. The GR Housing Subsidy amount was increased from \$300 to \$400 and the participant's contribution from the grant was reduced from \$136 to \$100. The new total amount available is \$500.</p> <p>F. & G. DPSS is internally working and has established procedures to pursue federal reimbursement for housing subsidy payments made to employable GR participants through CFET funding and to pursue reimbursement for housing subsidy payments made to GR participants who are approved for SSI through the IAR process. The money recouped from SSI will be reinvested in additional housing subsidies.</p>	IMPLEMENTED AUGUST 2010

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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Attachment A

NO.	APPROVED RECOMMENDATIONS	STATUS	IMPLEMENTATION DATE
5	<p>H. Recruiting participants for the Housing Subsidy and Case Management Program during the GR intake process and making additional efforts throughout the course of case management to encourage participants to remain in the Housing Subsidy and Case Management Program and identify causes of participants dropping out of the subsidy.</p>	<p>H. Two training sessions were conducted on July 15, 2010, to provide Project staff, intake and approved eligibility staff, GROW Case Managers and SSI Advocates with the new procedures on the expansion of the Housing Subsidy Pilot Program.</p> <p>August 2, 2010, the final approved Administrative Directive was released and the expansion of the Housing Subsidy Pilot Program was implemented.</p> <p>The GR Housing Subsidy Program currently has a total of 1,540 slots.</p> <p>Currently, there are 1,216 individuals receiving a housing subsidy, of whom, 1,030 are receiving the higher subsidy amount of \$400, which took effect in August 2010. The remaining 186 participants continue to receive the lower \$300 subsidy, because they began receiving the subsidy prior to August 2010.</p>	<p>We learned of a decision by United States Department of Agriculture to limit CFET claiming for housing assistance to employable GR participants to two months per Federal Fiscal Year. As a result, the number of subsidies allocated to the GR employable category has been reduced from 50% of the total number of allocated subsidies to 25%. The number of active GR employable subsidies as of <u>December 31, 2011</u>, is 285. With the implementation of this change, project staff began suspending the approval of any new subsidies for this category until the total number of active subsidies is below the 25% allocation (385). The subsidies that become vacant due to disengagement are being allocated to the GR disabled participants pursuing SSI or Veterans Benefits.</p>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
December 31, 2011

Attachment A

NO	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE						
5	<p align="center">PERFORMANCE DATA</p> <p>As of December 31, 2011:</p> <table> <tr> <td>Total housing subsidy slots</td> <td align="right"><u>1,540</u></td> </tr> <tr> <td>Individuals receiving housing subsidy</td> <td align="right"><u>1,216</u></td> </tr> <tr> <td>Pending applications</td> <td align="right"><u>504</u></td> </tr> </table> <p>For the quarter of September 2011 through December 2011, the GR Housing Subsidy and Case Management Project placed 296 homeless GR participants into housing.</p>	Total housing subsidy slots	<u>1,540</u>	Individuals receiving housing subsidy	<u>1,216</u>	Pending applications	<u>504</u>	<p>DPSS has received guidance from County Counsel on assessing the feasibility of implementing Master Leasing.</p> <p>We are developing a questionnaire to use with Board & Care facilities to inquire if they may be interested in master leasing.</p>	JUNE 2012
Total housing subsidy slots	<u>1,540</u>								
Individuals receiving housing subsidy	<u>1,216</u>								
Pending applications	<u>504</u>								
6	<p>Implement a pilot project (subject to a cost benefit analysis) by master leasing and/or purchasing foreclosed apartment buildings and/or multi-family housing units and/or dorm-like housing to be provided for the indigent homeless population. This housing should be owned and/or operated by a non-profit housing developer and/or homeless service provider with expertise in managing housing with services.</p>	<p>Address supportive housing needs by:</p> <p>A. Exploring housing options for mentally ill participants through City and County Housing Authorities and other smaller Housing Authorities throughout L.A. County.</p>	<p>A. DMH and DPSS staff held a pre-meet on April 27, 2010, to discuss possible housing experts and providers to be invited to assist with the implementation on this effort. A list of potential collaborative agencies was developed. The responsible workgroup met on June 24, 2010, to discuss the implementation plan for this project.</p> <p>A second workgroup meeting was held on August 4, 2010. A presentation on the Mental Health Services Act (MHSA) was made by Department of Mental Health (DMH) staff. Additionally, Los Angeles Homeless Services Authority (LAHSA) staff made a presentation on Project 50. MHSA, A Community of Friends and some local missions were identified as agencies that offer potential housing options to mentally ill GR participants who meet their criteria.</p>						
7			APRIL 2012						

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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7	B. Identifying and leveraging County funding for housing resources and related services that already receive county funding or support.	<p>B. Additionally, the group discussed the most viable projects and funding, which currently have housing slots available. All of the projects identified have limited funding. However, A Community of Friends, which is funded by the Community Development Commission (CDC), will be further explored.</p> <p>Project on target for implementation.</p> <p>DPSS is exploring partnership with Skid Row Housing Trust (SRHT). SRHT is a permanent supportive housing provider in downtown Los Angeles that currently operates 1,500 apartments, the majority of which are for homeless individuals.</p> <p>DPSS and DMH are collaborating to provide housing options for the mentally ill. The participants will be provided a Housing Subsidy Program and the \$500 subsidy will be leveraged with Full Service Partnership (FSP) funding to provide housing, treatment, and services for these participants. DMH will provide 100 FSP slots for GR participants.</p> <p>A CD containing a list of the entire GR caseload with dates of birth and Social Security numbers was provided to DMH on June 16, 2011. DMH staff compared this list with their list of individuals enrolled in a FSP slot looking for matches on both lists. In August 2011, DMH reported a total of 366 matches.</p>	<u>IMPLEMENTED</u> <u>MAY 2011</u>
8	Subject to detailed operational and fiscal planning during Phase Two of the GR Restructuring process, eliminate the current cursory employability/Needs Special Assistance (NSA) screening and replace it with a more extensive medical/mental health disability assessment performed by (1) DMH, (2) DHS or possibly DPH, and/or (3) DHS Public Private Partners (PPPs). For permanently disabled participants in need of SSI additional documentation to support their applications, a comprehensive medical/mental health evaluation would be performed. The extensive assessments and the comprehensive medical and mental health evaluations and write-ups will be funded	<p>Meetings were held with DMH and DHS regarding the implementation of the Disability Assessments/Comprehensive Evaluations.</p> <p><u>Mental Health Disability Assessment</u></p> <ul style="list-style-type: none"> • DMH completed hiring the 18 PSWs and was fully staffed by July 2011. • New mental health assessment training completed on October 28, 2010. All PSWs (a total of 18) were hired by DMH and <u>are now</u> working in the GR District Offices. • DMH staff began conducting the new mental health assessments on October 12, 2010, at Metro Special, 	<u>IMPLEMENTED</u> <u>MAY 2011</u>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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Attachment A

NO.	APPROVED RECOMMENDATIONS	STATUS	IMPLEMENTATION DATE
8	with 50 - 75% new federal revenue.	<p>Metro East, San Fernando, Pasadena and Wilshire Offices.</p> <ul style="list-style-type: none"> DMH has expanded to all Districts on a staggered basis as of November 2011. DMH submitted staff roll-out plan on October 5, 2010. DMH reported that in December 2011, its Clinicians saw <u>1,311</u> participants and determined <u>1,215</u> of them to have a mental health disability, of which <u>341</u> have a permanent mental health disability. This translates into <u>28.1%</u> of individuals screened having a permanent mental health disability compared to only 1.5% prior to implementation. For December 2011, 25.2% were determined to be Permanent NSA, so the December rate is <u>3%</u> higher than in August, continuing the trend of an increasing rate of Permanent NSA diagnosis by the DMH PSWs. This means that more GR participants are determined to be potentially eligible for SSI and provided SSI advocacy services. The reported numbers above are all from the new DMH mental health assessments and do not include the cursory NSA screenings done by DPSS Social Workers when there is a need for more assessments than can be completed by the available DMH licensed staff. Through December 2011, DMH Clinicians reported that a total of <u>13,270</u> participants have been seen. Of these, <u>12,564</u> have been determined to have a mental health disability, and <u>3,207</u> (or <u>25.5 %</u>) of these were determined to have a permanent mental health disability. This compares to only 1.5% permanent designations prior to implementation. 	<p>PERFORMANCE DATA</p> <p>October 2011</p> <ul style="list-style-type: none"> Participants seen by DMH Clinicians <u>972</u> Participants determined NSA <u>906</u> Determined permanent NSA <u>246</u> Determined temporary NSA <u>660</u> Determined Not NSA <u>6</u>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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NO.	APPROVED RECOMMENDATIONS	STATUS	IMPLEMENTATION DATE
		<p>November 2011</p> <ul style="list-style-type: none"> Participants seen by DMH Clinicians <u>1,171</u> Participants determined NSA <u>1,090</u> Determined permanent NSA <u>332</u> Determined temporary NSA <u>758</u> Determined Not NSA <u>80</u> 	
		<p>December 2011</p> <ul style="list-style-type: none"> Participants seen by DMH Clinicians <u>1,311</u> Participants determined NSA <u>1,215</u> Determined permanent NSA <u>341</u> Determined temporary NSA <u>874</u> Determined Not NSA <u>96</u> 	
		<p>As of December 31, 2011:</p> <p><u>Participants seen</u> <u>13,270</u></p> <p><u>Participants determined to have a mental disability</u> <u>12,564</u></p> <p><u>Participants determined to have a permanent mental disability</u> <u>3,207</u></p> <ul style="list-style-type: none"> DMH staff began conducting the new mental health assessments on October 12, 2010, at Metro Special, Metro East, San Fernando, Pasadena and Wilshire Offices. County wide roll-out of the mental health assessments was completed in November 2011. <p><u>Mental Health Disability Comprehensive Evaluation</u></p> <ul style="list-style-type: none"> The workgroup first met to discuss mental health comprehensive evaluations on November 17, 2010. The workgroup held two additional meetings on January 25, 2011, and March 14, 2011. <p>The following DPSS Offices have been identified as suitable</p>	

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
8	<ul style="list-style-type: none"> • locations for the Comprehensive Evaluations: <ul style="list-style-type: none"> ◦ Civic Center District #14 ◦ GAIN Region I ◦ San Gabriel Valley District #20 ◦ Lancaster District #67 ◦ Pomona (GROW site) • DMH has drafted the evaluation tool. • DMH has submitted an annual budget for the Comprehensive Evaluations for \$390,020, including two Clinical Psychologists and a Staff Assistant. • A Meeting was held on June 14, 2011 with Fiscal staff from DMH and DPSS, and DPSS GR Program staff to discuss the financial component of the comprehensive evaluations. • Revised budgets were submitted by DMH in August and September. DPSS is in the process of reviewing the budget. • DPSS' Contract Management Division is now negotiating the <u>Letter of Commitment for the Comprehensive Evaluation with DMH</u>. • Estimated completion date is March 2012. 	<p><u>Medical Disability Assessment/Comprehensive Evaluations</u></p> <p>Subsequent to the Board's approval of this recommendation, the County Counsel for DHS determined that the medical disability assessments fall outside of the scope of the existing contracts with DHS' Public Private Partners (PPPs) and, thus, neither the medical disability assessments nor the comprehensive evaluations can be implemented through an amendment to current PPP contracts.</p> <p>DPSS released a Request For Information (RFI) in an effort to identify Federally Qualified Health Centers (FQHC) and/or FQHC-look-alikes to provide the Medical Disability Assessment/Comprehensive Evaluations Services. Nine agencies were identified as having interest in providing Medical Disability Assessment Services/Comprehensive Evaluations to the fourteen GR Districts starting May 16 for a 19-month period. DPSS is currently moving forward with</p>	

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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Attachment A

NO.	APPROVED RECOMMENDATIONS	STATUS	IMPLEMENTATION DATE						
8	<p>preparing a Board Letter seeking approval to extend the current contracts beyond the Dec 2012 termination date, pending a competitive procurement process which will be done through a Request for Proposals (RFP).</p> <ul style="list-style-type: none"> • Board Letter seeking delegated authority to execute contracts with nine FQHC was approved by the Board on April 12, 2011. • Contracts were <u>executed</u> in May 2011. • Implementation of the Physical Health Disability Assessment began on May 16, 2011. • Implementation of the Physical Health Comprehensive Evaluation is targeted for May 2012. • The "Employable with Accommodations" designation <u>was</u> implemented in August 2011. • DPSS made modifications to the LEADER System to add the new employability types, which will be used by the disability assessment contractors. The LEADER modifications went into effect on November 4, 2011. • DPSS and DHS met with the nine recommended Physical Disability Assessment/Comprehensive Evaluation Services providers on March 24, 2011, to discuss the transition plan, the draft assessment tool and scheduling capacity, and their agency's concerns. • Each agency has identified a liaison to work with DPSS staff on the revision and finalization of the disability assessment tool. The disability assessment tool and workgroup met on Tuesday, March 29, 2011. The assessment tool is now finalized. <p>In the month of March 2011, the previous contractor, QTC, conducted a total of 11,306 cursory employability screenings, which yielded the following results:</p> <table> <tr> <td>Employable</td> <td>571 (5.1%)</td> </tr> <tr> <td>Temporarily Unemployable</td> <td>10,629 (94%)</td> </tr> <tr> <td>Permanently Unemployable</td> <td>106 (0.9%)</td> </tr> </table>	Employable	571 (5.1%)	Temporarily Unemployable	10,629 (94%)	Permanently Unemployable	106 (0.9%)	IMPLEMENTED MAY 2011 (DISABILITY ASSESSMENTS)	MAY 2012 (COMPREHENSIVE EVALUATIONS)
Employable	571 (5.1%)								
Temporarily Unemployable	10,629 (94%)								
Permanently Unemployable	106 (0.9%)								

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GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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Attachment A

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
8		<p>Number of Medical Disability Assessments provided by FQHC in October 2011 and November 2011:</p> <p><u>October 2011</u></p> <ul style="list-style-type: none"> • Number of patients seen: <u>9,119</u> • Number determined Employable: <u>269</u> • Number determined Temporary Unemployable: <u>7,150</u> • Number determined Permanently Unemployable: <u>217</u> • Number determined Employable with Accommodations: <u>1,482</u> • Number determined Unemployable with Accommodations: <u>1</u> <p><u>November 2011</u> Number of patients seen: <u>8,640</u></p> <ul style="list-style-type: none"> • Number determined Employable: <u>293</u> • Number determined Temporary Unemployable: <u>7,137</u> • Number determined Permanently Unemployable: <u>150</u> • Number determined Employable with Accommodations: <u>1,057</u> • Number determined Unemployable with Accommodations: <u>3</u> <p>Since the inception of the project through <u>November 30, 2011</u>, the cumulative number of Medical Disability Assessments provided by FQHCs are as follows:</p> <ul style="list-style-type: none"> • Number of patients seen: <u>45,784</u> • Number determined Employable: <u>1,449</u> • Number determined Temporary Unemployable: <u>38,076</u> • Number determined Permanently Unemployable: <u>1,417</u> • Number determined Employable with Accommodations: <u>4,789</u> • Number determined Unemployable with Accommodations: <u>53</u> <p>IMPLEMENTED MAY 2011 (DISABILITY ASSESSMENTS)</p> <p>MAY 2012 (COMPREHENSIVE EVALUATIONS)</p>	

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9	<p>DHS, DMH, and LASD to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI. Most of the costs will be funded with 50% new federal revenue.</p>	<ul style="list-style-type: none"> • Project protocols were released and SSI Advocacy staff were trained. DPSS continues to meet with DMH, DHS and LASD to clarify issues, exchange best practices and measure the progress made. • DHS has finalized hiring all seven Registered Nurses (RNs). • DMH has hired both of its RNs. LASD has now hired a permanent RN to work in this project. • A comprehensive training for RNs was conducted on August 13, 2010. Training presenters included staff from SSA, Disability Determination Services Division (DDSD) and DHS. • The project was implemented in August 2010. • DHS, DMH and LASD are now processing pre-clearance requests and retrieving medical and mental health records. • DMH conducted training on documenting mental health conditions for DHS/DPSS/LASD/SSI staff and SSI Advocates on May 11 and June 2, 2011. • DMH <u>has cleared its backlog from June 2011</u>. As such, DHS <u>is no longer sharing a full-time equivalent nurse with DMH</u>. • Expansion of the Record Retrieval Project to DPSS' disability health assessment and evaluation contracted providers is being considered. If feasible, DPSS will work with DHS to develop and implement this expansion. • Currently, DHS has six of seven RNs allocated to <u>this project working on it</u>. DHS is in the process of hiring a <u>seventh RN</u>. • DMH and LASD are fully staffed with two and one RNs respectively. There have been no challenges reported by <u>any of the departments</u>. 	IMPLEMENTED AUGUST 2010

Note: New updates are underlined

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9	<ul style="list-style-type: none"> There has been a 13% increase in the number of records requested and a 9% increase in the number retrieved from the previous quarter. <p>PERFORMANCE DATA</p> <p>Cumulative records retrieved as of <u>12/31/11</u> by County Departments:</p> <table> <tbody> <tr> <td>DHS</td> <td>Requested - <u>1,196</u></td> </tr> <tr> <td></td> <td>Received - <u>1,073</u></td> </tr> <tr> <td>DMH</td> <td>Requested - <u>1,066</u></td> </tr> <tr> <td></td> <td>Received - <u>685</u></td> </tr> <tr> <td>LASD</td> <td>Requested - <u>387</u></td> </tr> <tr> <td></td> <td>Received - <u>220</u></td> </tr> </tbody> </table>	DHS	Requested - <u>1,196</u>		Received - <u>1,073</u>	DMH	Requested - <u>1,066</u>		Received - <u>685</u>	LASD	Requested - <u>387</u>		Received - <u>220</u>	<p>Combined cumulative records retrieved for project as of December 31, 2011:</p> <p>Cumulative number of records requested: <u>2,659</u> Cumulative number of records received: <u>1,978</u> (74% of the requests submitted).</p> <p>Cumulative number of requests with a response "No Records Available": <u>438</u> (16% of requests submitted). Total number of records pending: <u>259</u> (10% of requests submitted).</p>
DHS	Requested - <u>1,196</u>													
	Received - <u>1,073</u>													
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10	Maximize the claiming of retroactive Medi-Cal for GR participants who qualify for SSI and Medi-Cal.	<p>Preliminary teleconference meetings with DPSS, DMH, and DHS were held in June 2010 to further discuss the data needs for this project.</p> <p>The Project was implemented in September 2010 when DPSS provided SSI IAR listings to DHS and DMH dating back to 2007.</p> <p>Effective June 2011, Eligibility Systems Division (ESD) has been successfully transmitting the SSI IAR Lists to DHS via Secure FTP. DHS has given confirmation that they have received the files. DMH has its own web-based secure file transfer site. DMH has created the accounts that allow DPSS to upload the data directly onto the DMH site. GR Program staff has successfully transmitted the SSI IAR list monthly since June 2011. However, DHS and DMH have stated that they require additional information in order to increase the number of retroactive Medi-Cal claims they can make. DPSS is working with DHS and DMH and exploring the availability of the information they require.</p>	IMPLEMENTED SEPTEMBER 2010
11	Integrate the Public Defender (PD) into SSI Advocacy, where GR participants are already clients of the Public Defender and advocacy can be combined with clients' representation in court.	<p>PD identified the Compton Courthouse as the location for this project. Staff has been selected. One DPSS SSI Advocate and one PD Psychiatric Social Worker II will be collocated at the PD site to provide SSI Advocacy services. A workgroup meeting was held in November 2010. The fiscal provisions of the Memorandum of Understanding (MOU) were revised and the document was signed by PD and the DPSS Director. The Administrative Directive was finalized in October 2011. Project protocols and equipment installation were completed. Project was implemented as planned on August 31, 2011.</p> <p>Since the inception of the pilot, staff have screened approximately 2,000 PD clients. It was determined that most of these clients reside outside the pilot's area of service. Therefore, in order to maximize the number of pilot</p>	IMPLEMENTED AUGUST 2011

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11	<p>participants, it was necessary to expand the initial boundaries of service from the South Central District to South Special, Southwest Special and potentially to other District Offices. To support the expansion, an amendment to the MOU is near finalization. To add to the expansion efforts, the PD is also reviewing information of PD clients at various Courts to identify where it would be most effective to utilize the pilot advocacy services.</p>	<p>A.1. The implementation plan for this project was finalized by the workgroup. Items that were finalized include GROW Computer Programming changes; curriculum for specialized job club class by Los Angeles County Office of Education (LACOE); and instructions to staff. Two new GROW components were implemented in January 2011 to address the special needs of TAY participants: a specialized job club for TAY participants currently offered as a pilot at Southwest Special GROW site Pathways to Success (PTS) and a new Computer Applications Class (CAC) for TAY with basic computer skills is offered at Metro Special GROW site. Expansion to other GROW sites took place in October 2011.</p> <p>During this quarter, 46 participants enrolled in PTS and 22 (48%) were placed in jobs. Thirteen participants enrolled in CAC, and 4 (31%) were placed.</p>	IMPLEMENTED JANUARY 2011
12	<p>Modify the GROW Program to:</p> <ol style="list-style-type: none"> A. Customize services to individuals who are classified as: <ol style="list-style-type: none"> 1. Transitional Age Youth (TAY); 2. Veterans; and 3. Participants exiting Mandatory Substance Abuse Program (MSARP). 	<p>A.2. This project was implemented in November 2011. The GROW Computer system identifies participants who self-disclose being Veterans and a list is generated. Case Managers provide job opportunities and other resources specific to Veterans to this population. An Administrative Directive will be released for clearance during the month of March 2012 to provide written instructions to GROW staff.</p>	PARTIALLY IMPLEMENTED JUNE 2011

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12	<p>A.3. Computer enhancements and implementation plan for this project have been completed. This project was implemented in June 2011. With the implementation of this project, Fastrak services (specialized job skills preparation class) are now available to MSARP participants. Effective September 2011, two reports were generated to help GROW staff identify participants who have completed the MSARP for enrollment in other GROW activities.</p> <p>B & C. Projects 12 B & C were implemented on August 2, 2010, with limited services. During the interim phase of this project, services have been offered to more than 50 participants, with a placement rate of 25%.</p> <p>An Administrative Directive for projects B & C was prepared, and cleared in July 2011. DPSS is currently addressing some concerns brought up by legal advocates. This has delayed issuance of this Administrative Directive. Implementation of these projects at all 14 GR and GROW District Offices is targeted for <u>March 2012</u>.</p> <p>D. The workgroup has finalized the implementation plan for this project. Policy and procedures for this project have been finalized. With the implementation of this project, GROW staff is now developing customized employment plans to meet the special needs of the youth, with prioritization of DCFS and Probation youth. Collaboration between DPSS, DCFS and Probation was implemented in June 2011.</p> <p>E. GROW Computer (MAPPER) has been programmed to track outcomes from the above projects. The system tracks the number of enrollments and successful outcomes, including placements.</p>	<p>IMPLEMENTED JUNE 2011</p> <p>PARTIALLY IMPLEMENTED AUGUST 2011</p> <p>IMPLEMENTED JUNE 2011</p> <p>IMPLEMENTED JULY 2011</p>	

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13	Establish collaboration between DPSS and the Probation Department to reduce the number of Emerging Adults (age 18-24) applying for GR benefits.	DPSS has established collaboration with DCFSS and Probation Department to facilitate referrals to GROW services, including American Recovery and Reinvestment Act (ARRA) Projects. DPSS has designated a liaison to work with both departments on this effort. This project was completed in May 2010.	IMPLEMENTED MAY 2010
14	Pursue federal reimbursement through FSET, at a rate of 50%, for mental health, domestic violence, and, to the extent possible, substance abuse services provided to GROW participants.	The DPSS plan that was submitted to the State was approved on May 5, 2010. Reimbursement through CFET for costs associated with support services to GROW participants can be claimed effective October 2009. This project was completed in May 2010.	IMPLEMENTED MAY 2010
15	Establish collaboration with CSS, L.A. City and all other Workforce Investment Boards to provide job services and employment opportunities through the Work Source Centers, geared toward both youth and adult GROW participants.	This project was implemented in February 2011. The following WorkSource Centers and One Stops <u>are</u> participating in this project: The Gardena South Bay One-Stop Business & Career Center, Inglewood South Bay One-Stop Business & Career Center, Southeast Los Angeles County Workforce Investment Board Youth Center, Southeast Los Angeles Crenshaw WorkSource Center, Marina Del Rey WorkSource Center, East Los Angeles WorkSource Center, Florence-Firestone WorkSource Center, and Los Angeles WORKS. DPSS and the Department of Community and Senior Services (CSS) are working on recruiting Workforce Investment Act (WIA) agencies that can provide services to participants residing in the San Fernando and Antelope Valley areas of the County.	IMPLEMENTED FEBRUARY 2011
16	Expand GROW to include GED preparation.	DPSS finalized policy/procedures to implement a GED component for GROW participants who lack a high school diploma. A list of available education entities has been identified. Programmatic changes to MAPPER have been completed.	IMPLEMENTED JUNE 2010

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17	<p>Conduct a comprehensive study of the Mandatory Substance Abuse and Recovery Program (MSARP) to evaluate its effectiveness.</p> <p>A. DPSS and DPH-ADPA will evaluate the redesign of MSARP based upon the results of the evaluation.</p> <p>B. Use the evaluation outcomes and DPH-ADPA Rate Study to inform a resolicitation process for GR services.</p> <p>C. Evaluate the need for substance abuse treatment services for emerging adults ages 18-24 and the need to design specialized treatment services for this population.</p>	<p>CEO-SIB staff has shared a draft report, which was discussed during a meeting with DPSS staff. The data match with DPH was completed and merged with DPSS data in preparation for analysis. <u>CEO-SIB conducted the analysis and submitted the draft report for review.</u> DPSS provided comments and CEO-SIB is in the process of finalizing the report. DPSS plans to meet with the Department of Public Health and CEO-SIB to review the final version of the MSARP report in mid-March. Filing of the final report to the Board was initially scheduled for November 2011, but has been postponed until the report is reviewed and revised with DPH's final comments.</p>	<u>MARCH 2012</u>
18	<p>Develop State and federal legislative/regulatory proposals to assist indigent adults and/or mitigate County costs and work with stakeholders to develop these proposals.</p>	<p>DPSS is examining possible areas where legislative and regulatory changes may be necessary and feasible. The workgroup has identified ten potential concerns that with further research may formulate into a State or federal legislative proposal for indigent adults. The last workgroup meeting was held on November 23, 2010. This project has been placed temporarily on hold as part of project prioritization and shall resume in May 2012.</p>	<u>DECEMBER 2012</u>
19	<p>DPSS to expand data collection for the GR Program.</p>	<p>A meeting to discuss data collection and computer programming for all SSI Advocacy-related recommendations was held on June 22, 2010. GR data, including GR Restructuring Data, will be collected and made available through DPSSSMART, SSIMAP database. Data collection is an ongoing effort.</p>	<u>IMPLEMENTED AUGUST 2010</u> <u>Ongoing</u>

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20	Include the GR Program in the County's and DPSS' strategic plans.	<p>The GR Program has been incorporated in the County's and DPSS' Strategic Plan.</p> <p>The County's Strategic Plan Objectives are:</p> <p>Objective 2: General Relief to SSI: By June 30, 2010, assess the success of the implementation of the GR-to-SSI project, working with the Department of Public Social Services, Health Services, Mental Health, and Public Health staff. Based upon the evaluation, determine whether to continue program and/or integrate with GR Efficiencies Initiative.</p> <p>Objective 3: By June 30, 2010, to achieve GR Efficiencies, develop recommendations with stakeholders, present plan to the Board of Supervisors, and begin project implementation.</p> <p>The DPSS' Strategic Plan Objectives are:</p> <p>Objective I.1.7: By June 2010, redesign the GR Program to reduce homelessness, increase the number of customers who transition to SSI and increase the number of customers who become employed.</p>	<p>IMPLEMENTED APRIL 2010</p>
21	Conduct a pilot having the current Linkages GAIN Services Workers at two or three small DCFS offices work with the Children's Social Workers to utilize the Transition Conference as an opportunity to connect foster youth with County services.	The workgroup has finalized the implementation plan for this project. Policy and procedures have been released for clearance. This project was implemented in June 2011.	<p>IMPLEMENTED JUNE 2011</p>
22	Provide better screening for Veterans and better referrals for assistance with claims and strengthen DPSS case management for Veterans who are on GR to enable them to qualify faster for Veteran's benefits and services.	An initial meeting was held in June 2010 with Legal Aid Foundation of Los Angeles (LAFLA), Public Counsel, and Department of Military and Veterans Affairs (DMVA). Project protocols for the DPSS/LAFLA pilot have been drafted and shared with the responsible workgroup. Comments were received from the workgroup in June 2010.	<p>PARTIAL IMPLEMENTATION DECEMBER 2010</p>

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22	<p>A second meeting was held on August 17, 2010, with LAFLA to discuss the implementation of the pilot project.</p> <p>The DPSS/LAFLA Veterans pilot has been implemented in the Metro East office. Space arrangements for LAFLA staff at the Metro East office have been made. Policy for this project was officially released in December 2010.</p> <p>A telephone conference call was held on December 20, 2010 between DMVA and DPSS to discuss the next steps to implement the project.</p> <p>A conference call was held with DMVA's information technology vendor to discuss the feasibility of a data match. DMVA uses a vendor to host their database.</p> <p>Legal clarification is being sought to determine if a data match is legally feasible with DMVA and if an MOU will resolve the issue. The data match with DMVA would only be able to identify participants who are already receiving veterans disability benefits.</p>	<p>FULL IMPLEMENTATION MARCH 2012</p> <p>Additionally, the CEO-SIB is working with the federal Department of Veterans Affairs (VA) and has provided DPSS their VA contact information to discuss the feasibility of a data match to assist in the identification of Veteran GR participants. We have been in contact with the VA, and have been informed that a participant's Social Security Number is needed for a data match. County Counsel has indicated that unless we have the participant's consent, we cannot use their Social Security number for the data match. We are exploring other options.</p> <p>A meeting to review the veteran's pilot project and to discuss the number of veterans served is scheduled in March between GR Program staff, Metro East GR District and LAFLA representatives.</p>

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23	Assess and enhance the current mechanisms designed to enable former foster care youth, medically indigent under 21 and probation youth to receive and retain Medi-Cal.	<p>An internal meeting was held on May 25, 2010, to discuss current DPSS efforts on this subject.</p> <p>Foster Care Youth Children in foster care automatically continue on Medi-Cal until they reach age 21; however, 50% of cases are terminated at redetermination for failure to respond, mainly due to DPSS not having the individuals' current address.</p> <p>DPSS and DCFS have established a liaison to share address changes reported by the youth and thereby update their databases. Although DPSS explored sending a change of address card to Foster Care Youth, DCFS expressed that the card would be another piece of paper that the youth would discard. As such, we are now pursuing utilizing electronic means such as twitter, to keep in touch with Former Foster Youth. Additionally, we are in the process of adding the Medi-Cal redetermination form to Your Benefits Now. This will allow the former foster youth to submit the redetermination online.</p> <p>DPSS meets with DCFS monthly to identify issues, concerns, and enhancements to the current process.</p>	<u>APRIL 2012</u>

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23		<p>DPSS completed a computer data interface system with Probation (Medi-Cal Application and Probation Partnership System - MAPPS) to identify youth who are soon to be released from the probation system. MAPPS will allow Probation to input essential information about the Probation Youth into the system that will trigger a Medi-Cal pre-release referral to DPSS. However, due to resource issues, Probation is currently unable to provide sample data to test the data interface system between DPSS and Probation. The system must be tested prior to implementation. As a result, MAPPS screens have been modified to allow Probation to enter information into the system. Data will be input manually until Probation can transmit the data electronically.</p> <p>The Administrative Directive: Medi-Cal Pre-release Application Process for Wards in County Juvenile Facilities was released on November 17, 2011.</p> <p>DPSS is working with the Probation Department in developing the electronic interface, which is designed to <u>capture data</u> from all juvenile detention facilities and notify DPSS of incarcerated minor beneficiaries so that DPSS can <u>timely terminate their benefits</u>. Medi-Cal Application and Probation Partnership System (MAPPS) will be replaced once the interface is fully completed and implemented. In the interim, DPSS will utilize MAPPS as a means to identify incarcerated minors that may be receiving aid on an existing case. This interim solution is targeted for implementation in April 2012.</p>	June 2012
24	Increase the GR Participants resources by:	<p>A. Allowing GR recipients to remain on GR while saving more money. Permit GR participants to maintain a Restricted Savings Account up to a pre-determined amount for the purpose of saving for housing, education or training expenses, and/or to start a business that would not be countable towards the property limit.</p>	Note: New updates are underlined

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24	<p>B. Helping participants who have child support obligations by:</p> <ol style="list-style-type: none"> 1. Educating workers and participants about the assistance DPSS currently offers to help lower child support payments for participants. 2. Work with the Child Support Services Department to reduce child support payments for participants after they leave GR for the first six months they have a job, to allow them to get on their feet before resuming higher child support payments. 	<p>B.1. DPSS is working with CSSD to assess the feasibility of providing lower child support payments for GR participants.</p> <p>B.2. At a meeting on October 11, 2011, DCSS indicated that this recommendation is in conflict with federal and State rules which state that child support is collected based on the individual's earnings/income; therefore, this recommendation will not be pursued.</p>	IMPLEMENTED MAY 2010
25	Add positions in GR offices, through September 30, 2010, utilizing TANF emergency contingency funds (ECF), to assist GR participants navigate the GR process. Positions may be filled with GR non-custodial parents (NCPs) who qualify for ECF-funded subsidized employment.	This project was completed with the hiring of six participants who worked as Customer Services Assistants (CSAs) in the GR Districts lobby until September 30, 2010, when the available funding ended.	IMPLEMENTED MAY 2010

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26	CEO-SIB to conduct an evaluation of GR Program mandates, rules, time limits, sanctions, operational processes, and data limitations, including a cost/benefit analysis.	<p>CEO-SIB identified two contractors to conduct the evaluation of the GR Program. The first contractor secured to perform the Quantitative Process Analysis of Los Angeles County's GR Program is University of Sciences in Philadelphia.</p> <p>The second contractor secured to perform the Qualitative Process Analysis of Los Angeles County's GR Program is Linda Shaw, Ph.D., from California State University San Marcos. An action plan was developed by the contractors to convene focus groups to interview Eligibility Workers and Administrative staff. These focus groups were convened in August 2010. Researchers convened focus groups and interviewed GR Participants in January 2011.</p> <p>CEO-SIB researchers conducted the third part of the study themselves, a comparison of GR Program policies in Los Angeles and several other California counties.</p> <p>These reports are being finalized, prior to submission to the Board.</p>	FEBRUARY 2012
27	Establish a GR Anti-Homelessness Account in the CEO's budget to fund enhanced services to reduce GR homelessness. Fund this account with savings from enhanced GR services, including but not limited to GR grant savings for participants who receive a rental subsidy and secure employment/SSI, and Interim Assistance Reimbursement for rental subsidies for GR participants who qualify for SSI.	The Anti-Homelessness Account was set up in the DPSS Assistance budget in August 2010.	IMPLEMENTED AUGUST 2010

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28	<ul style="list-style-type: none"> ▪ Assist GR participants manage their money better by: <ul style="list-style-type: none"> ▪ Formulating a list of banks that allow recipients to establish accounts with no minimum balances and minimal overdraft fees. ▪ Assembling training materials instructing clients about budgeting and money management as well as the security advantages of keeping their funds in a bank account. The instruction topics would also include balancing their check book, if utilizing an ATM to check their account status, and avoiding bank fees. ▪ Focusing on providing this information to GR participants securing SSI benefits. ▪ Engaging with community organizations involved with assisting individuals with money management issues. ▪ Seeking volunteer agencies who will offer training or assistance to GR participants on money management. 	<p>Three workgroup meetings have been conducted to brainstorm and develop an implementation plan. Met with representatives from a local bank to learn what they can offer to GR participants and what training they can provide to Supplemental Security Income Medi-Cal Advocacy Program (SSIMAP) staff. A focus group meeting was conducted with SSI Advocates on August 19, 2010, to better define their role under this recommendation.</p> <p>Money Management training for SSIMAP staff was conducted by Consumer Action in October 2010. Once fully implemented, GR SSIMAP Advocacy staff will be able to counsel their participants on money management issues, help them create a budget and a spending plan.</p>	<u>IMPLEMENTED OCTOBER 2011</u>
29	<p>Do not limit the housing subsidy to nine months for employable GR participants. Instead, permit employable GR participants who reach the nine-month time limit to continue receiving the subsidy during the three months that they are ineligible to GR.</p> <p>DPSS should engage in a dialogue with Board and Care Operators to determine how to increase usage of board and care facilities by homeless GR participants. Explore providing information to GR participants on board and care facilities upon release from emergency rooms or hospitals.</p>	<p>LEADER modifications are pending to allow employable GR participants to receive housing subsidy after they reach the nine-month time limit.</p>	<u>DECEMBER 2012</u>
30		<p>A meeting with two Board and Care agencies to discuss other housing options for homeless GR participants took place on June 23, 2010.</p> <p>A meeting with the Workgroup was conducted on August 16, 2010 to discuss and identify an approach to start the dialogue with the Board and Care Operators.</p> <p>DPSS drafted a letter to outreach to Board and Care Operators. The purpose of this letter is to find out if the Board and Care Operators are interested in providing housing to</p>	<u>MARCH 2012</u>

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30	homeless participants. Board and Care operators will be provided information about the need for housing for GR homeless individuals and the opportunity to collaborate with DPSS. The CEO has taken the lead on this project.		DECEMBER 2011
31	<p>Improve upon DPSS' GR SSI and Medi-Cal Advocacy Program (GRSSIMAP) by:</p> <ol style="list-style-type: none"> 1. Advocating for a change in federal regulations that would extend the protected filing date from 60 days to as many as 365 days, to increase the period of time during which the County could secure Interim Assistance Reimbursement for GR grants/rental subsidies and retroactive Medi-Cal. 2. Customizing the approach to securing SSI based on the condition and available documentation for individual GR participants by: <ul style="list-style-type: none"> • Better identifying GR participants who are potentially eligible for SSI through a more extensive medical and/or mental health disability assessment (approved in Phase One). • Evaluating available medical treatment documentation and utilizing the document retrieval process (approved in Phase One), if necessary. 	<p>1. Preliminary discussions have taken place with the local Social Security Administration (SSA) regarding the protected filing date. A conference call was held with SSA, DDSD and DPSS in August 2010. At a meeting in March 2011 between SSA, the DDSD and DPSS, SSA stated that it would not be possible to change the protective filing date. Based on that response from the local SSA, DPSS will resume efforts to pursue a change at the federal level.</p> <p>2. The responsible workgroup met on November 18, 2010, to discuss customizing the approach to securing SSI based on available documentation. A focus group comprised of community and SSI Advocates <u>met</u> in July 2011 to review and provide input on a new approach to define guidelines for the SSI Advocates to pursue SSI based on available documentation.</p> <p>See update for Recommendation #8.</p> <p>See update for Recommendation #9.</p>	<p>NOVEMBER 2011</p>

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31	<ul style="list-style-type: none"> • Evaluating whether a comprehensive medical/mental health evaluation (approved in Phase One), and the resulting write-up would strengthen the SSI application, and, if so, refer the participant for an evaluation. • Making an appropriate decision about when to file the SSI application in order to increase the chance of approval, based on the participant's situation and the results of any assessments, medical documentation, and/or evaluation. 	<p>The responsible workgroup met on November 18, 2010. A meeting with a focus group comprised of community and SSI Advocates was held in February 22, 2011 to review a new approach for the development of a GR SSIMAP Handbook to define guidelines for the SSI Advocates. An additional meeting was held in December 2011 to finalize the GR SSIMAP Handbook. <u>Final changes have been incorporated into the document. The GR SSIMAP Handbook is targeted for release in March 2012.</u></p> <p>3. SOAR training has been completed. The last SOAR training session was held on September 30, 2010.</p> <p>4. On <u>September 27 and October 3, 2011, SSA/DDSD provided training to GR SSIMAP Advocates and FQHC Medical Contractors.</u></p> <p>5. See update for Recommendation #8.</p>	<p>IMPLEMENTED SEPTEMBER 2010</p> <p>PARTIALLY IMPLEMENTED OCTOBER 2010</p> <p>IMPLEMENTED MAY 2011</p>
32	<ul style="list-style-type: none"> 3. Implementing the SSI/SSDI Outreach Access and Recovery (SOAR) principles and strategies. 4. Seeking training from Social Security Administration for DPSS SSI advocates on SSI medical disability standards and case development. 5. Developing the disability assessment and evaluation tools in consultation with medical/mental health professionals and experienced SSI advocates. 	<p>Provide ancillary expenses for showers, shoes, clothes, etc., for those pursuing SSI, including a motel voucher for the night before an SSI appointment with California Department of Social Services or Social Security Administration, when needed to enable the participant to arrive on time.</p>	<p>A preliminary meeting with an internal DPSS focus group comprised of DPSS SSI Advocates to discuss the different ways of implementing the recommendation was held on June 23, 2010. The responsible workgroup meeting with all partners to discuss the project's course of action was held on June 24, 2010.</p> <p>The workgroup met on September 22, 2010 and December 7, 2010 to review the draft guidelines. Training was held in January 2011. Guidelines were released in May 2011.</p>

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NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
33	Collaborate with private medical facilities to retrieve medical and mental health records on behalf of GR participants to support their disability claim for SSI as part of the current DPSS-DHS homeless release project.	<p>Numerous attempts have been made to meet with the Hollywood Presbyterian and White Memorial hospitals but due to scheduling conflicts, a meeting has not been scheduled. However, both hospitals expressed interest in this project and agreed to meet to hear more details about the project.</p> <p><u>APRIL 2012</u></p>	
34	<p>Assist GR participants applying for SSI benefits by:</p> <ul style="list-style-type: none"> ▪ Identifying GR participants who are in need of mental health treatment to secure medical documentation needed to secure SSI; ▪ Subject to funding, providing mental health treatment to those participants; ▪ Prioritizing mental health services for GR participants who need to pursue SSI; ▪ Documenting those who cannot be treated due to lack of funding; ▪ Ensuring cost recoupment from retroactive Medi-Cal; ▪ Assessing current procedures for providing mental health treatment to GR participants; and ▪ Recommending changes to better keep participants engaged in treatment. 	<p>The first meeting with the responsible workgroup to discuss the protocols for this project was held on June 23, 2010.</p> <p>A second workgroup meeting was held on September 7, 2010. DMH, DPH, and Advocate representatives were present. The group discussed the recommendation and how to identify the participants in need of treatment to secure SSI and the need to document those who cannot be treated due to lack of funds. Some suggestions were made, but the lack of available funding was a barrier. A third workgroup meeting was held in October 2010.</p> <p>An internal meeting was held with CEO, DPSS, DMH and DHS in March 2011.</p>	<p><u>APRIL 2012</u></p>
35	DPSS SSI Advocates should provide case management that will help GR SSI applicants keep track of appointments.	A preliminary meeting with an internal DPSS focus group comprised of DPSS SSI Advocates was held on June 23, 2010, to discuss different ways of implementing the recommendation. The responsible workgroup meeting with all partners to discuss the project's course of action was held on June 24, 2010.	MARCH 2012

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
December 31, 2011

Attachment A

NO	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
35	<p>The workgroup generated recommendations which are currently under review and will be released via the GR SSIMAP Handbook.</p> <p>A workgroup meeting was held on November 18, 2010 to redefine the scope of the recommendation. The recommendation was expanded to allow advocates to do more case management activities. The meeting resulted in identifying more case management activities. They will be incorporated into the GR SSIMAP Handbook.</p> <p>An additional meeting was held in December 2011 to finalize the GR SSIMAP Handbook. Final changes have been incorporated into the document. The GR SSIMAP Handbook is targeted for release in March 2012.</p>		<u>MAY 2012</u>
36	<p>Pursue a pilot to coordinate ongoing health and mental health treatment for GR participants pursuing SSI, dependent upon available funding.</p>	<p>The first meeting with the responsible workgroup to discuss the protocols for this project was held on June 23, 2010.</p> <p>The workgroup met again on September 7, 2010 to discuss pursuing the recommended pilot. The group discussed the lack of available funding and the possibility of a pilot in an area that has both a DHS health clinic and a DMH mental health facility in close proximity. A third workgroup meeting was held in October 2010.</p>	
37	<p>Strengthen current process to identify GR participants who were previously on SSI and prioritize SSI advocacy for them.</p>	<p>DPSS is exploring a partnership with Skid Row Housing Trust (SRHT). SRHT is a permanent supportive housing provider in downtown Los Angeles that currently operates 1,500 apartments, the majority of which are for homeless individuals.</p> <p>A preliminary meeting with an internal DPSS focus group comprised of DPSS SSI Advocates was held on June 23, 2010, to discuss different ways of implementing the recommendation. The responsible workgroup meeting with all partners to discuss the project's course of action was held on June 24, 2010.</p>	<u>MARCH 2012</u>

Note: New updates are underlined

DPSS is in the process of finalizing the guidelines for SSI

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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Attachment A

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE																								
37		Advocates. The responsible workgroup met on December 7, 2010. The guidelines will be incorporated into the SSIMAP Handbook. An additional meeting was held in December 2011 to finalize the GR SSIMAP Handbook. Final changes have been incorporated into the document. The GR SSIMAP Handbook is targeted for release in March 2012.	IMPLEMENTED JUNE 2010 AND ONGOING																								
38	Establish the following targets for SSI Approvals: 1. For SSI applications filed in FY 10/11 and ongoing, increase the SSI approval rate at the initial application level to at least 50% in FY 10/11, to at least 60% in FY 11/12, and to at least 70% in FY 12/13. For the overall number of SSI approvals, increase the number of SSI approvals as follows: <table> <thead> <tr> <th>FY</th> <th>FY</th> <th>FY</th> <th>FY</th> </tr> <tr> <th>2008-09</th> <th>2010-11</th> <th>2011-12</th> <th>2012-13</th> </tr> </thead> <tbody> <tr> <td>Baseline</td> <td>Target</td> <td>Target</td> <td>Target</td> </tr> <tr> <td>5,891</td> <td>6,400</td> <td>6,900</td> <td>7,400</td> </tr> </tbody> </table>	FY	FY	FY	FY	2008-09	2010-11	2011-12	2012-13	Baseline	Target	Target	Target	5,891	6,400	6,900	7,400	The workgroup meeting to discuss different ways of accomplishing the targets for SSI approvals was held on June 24, 2010. After all of the GR recommendations are implemented, the Advocates believe that they will have additional tools to enhance services to participants and to assist with more complete applications being submitted to SSA for SSI approval. The SSI targets were reiterated in the GR SSIMAP bi-monthly Newsletter and at the SSI Advocates Quarterly meeting. PERFORMANCE DATA <table> <thead> <tr> <th>Time Period</th> <th>SSI Approvals</th> </tr> </thead> <tbody> <tr> <td>FY 2010-11:</td> <td>8,380</td> </tr> <tr> <td>FY 2011-12 first half:</td> <td>3,904</td> </tr> <tr> <td>Cumulative Total:</td> <td>12,284</td> </tr> </tbody> </table>	Time Period	SSI Approvals	FY 2010-11:	8,380	FY 2011-12 first half:	3,904	Cumulative Total:	12,284	IMPLEMENTED JUNE 2010 AND ONGOING
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2008-09	2010-11	2011-12	2012-13																								
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Cumulative Total:	12,284																										
39	Address/fix non-disability related SSI eligibility issues such as citizenship documentation, birth certificate etc.	The responsible workgroup meeting with all partners was held on June 24, 2010. A second Workgroup meeting was held on August 29, 2010. The SSI Advocates exchanged valuable tips on how to resolve non-disability SSI eligibility issues. We are currently drafting a document to show how non-disability issues may be addressed. This document will be shared with DPSS line staff.	APRIL 2012																								

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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Attachment A

NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
39	Document was drafted and presented during Workgroup meeting on December 2, 2010. The Workgroup provided valuable input. A document is in the process of modification to reflect the Workgroup's input. Document is to be part of GR SSIMAP Handbook.	An additional meeting was held in December 2011 to finalize the GR SSIMAP Handbook. Final changes have been incorporated into the document. The GR SSIMAP Handbook is targeted for release in March 2012.	IMPLEMENTED AUGUST 2010
40	Strengthen existing relationships with the Social Security Administration.	An upper level management meeting with the Social Security Administration, Veterans Administration, CEO and various County Departments was held on June 22, 2010. The purpose of the meeting was to stress the importance of collaboration among departments for the successful implementation of the GR Restructuring projects.	IMPLEMENTED AUGUST 2010
41	Implement a transportation pilot project to evaluate the impact of providing monthly bus passes to two groups of GR participants to determine whether providing bus passes (instead of individual tokens) increases their likelihood of approval for SSI:	<p>A meeting with the responsible workgroup to discuss the project's course of action was held on June 24, 2010.</p> <p>A second workgroup meeting was held on September 22, 2010, to review the draft guidelines for the pilot.</p> <p>A third workgroup meeting was held on December 7, 2010, to determine the District Offices for the pilot and the method of issuance for the pilot. A fourth meeting was held in January 2011 to determine the valid survey reports needed and logistics of implementation based on availability of monthly</p>	DECEMBER 2012

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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NO.	APPROVED RECOMMENDATIONS	STATUS	TARGET IMPLEMENTATION DATE
41	<p>participant will contribute \$10 per month toward the cost of the bus pass.</p> <p>Results will be compared after one year of the pilot. If providing bus passes is shown to be a good method of helping participants obtain approval of SSI benefits more quickly, DPSS will then explore ways of providing them to more participants.</p>	<p>bus pass issuance from the Transit Access Pass card program that the Auditor-Controller is negotiating with the Los Angeles Metropolitan Transportation Authority.</p>	
42	<p>Reconstitute the GR Restructuring Workgroup as the GR Restructuring Steering Committee to meet quarterly to do the following:</p> <ul style="list-style-type: none"> ▪ Work together on the implementation process; ▪ Review evaluation data and make recommendations for any adjustments to processes or targets; and ▪ Identify and pursue opportunities for GR service integration. 	<p>All GR Restructuring Workgroup members were invited to be part of the specific workgroups for the individual recommendations.</p> <p>The first quarterly meeting of the GR Restructuring Steering Committee was held on July 27. The group was given a status update on each of the 42 recommendations.</p> <p>The Workgroup continues to meet on a quarterly basis.</p>	<p>IMPLEMENTED JUNE 2010</p>

(updated 3/12/12)

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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Month/Year	Total Aided Persons	% Change from Previous Month				Average Age		Female
			Employable	Unemployable	E	U	Male	
July	2010	101,683	40,244	61,439	33	43	67,576	34,107
August	2010	102,982	1.30%	41,087	61,895	33	43	68,395
September	2010	104,057	1.10%	41,380	62,677	33	43	68,997
October	2010	104,042	0.00%	40,919	63,123	33	43	69,088
November	2010	104,969	0.90%	40,145	64,824	33	43	69,695
December	2010	107,452	2.40%	44,242	63,210	33	43	71,520
January	2011	108,951	1.40%	45,452	63,499	34	43	72,534
February	2011	106,390	-2.40%	44,622	61,768	34	43	70,733
March	2011	109,212	2.60%	46,250	62,962	34	43	72,709
April	2011	109,305	.08%	47,930	61,375	34	43	72,885
May	2011	109,062	-.22%	40,873	68,189	34	43	72,631
June	2011	111,018	1.79%	43,431	67,587	33	43	73,886
July	2011	112,308	1.15%	46,692	65,616	34	43	74,516
August	2011	113,344	.92%	50,774	62,570	34	43	75,176
September	2011	112,898	-.40%	51,974	60,924	34	43	74,790
October	2011	110,285	-2.31%	49,894	60,391	34	43	73,082
November	2011	107,656	-2.38%	46,463	61,193	34	43	71,271
December	2011	106,647	-1.00%	45,710	60,937	34	44	70,715

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
December 31, 2011

Attachment A

GR OUTCOMES					
Month/Year	JOB PLACEMENTS		SSI APPROVALS		
	Monthly	Cumulative FY 2010/11	Monthly	Monthly	Cumulative FY 2010/11
July 2010	1,234	1,234	598	598	598
August 2010	1,512	2,746	691	1,289	1,289
September 2010	1,562	4,308	639	1,928	1,928
October 2010	1,353	5,661	611	2,539	2,539
November 2010	1,303	6,964	664	3,203	3,203
December 2010	1,231	8,195	854	4,057	4,057
January 2011	1,115	9,310	671	4,728	4,728
February 2011	1,132	10,442	646	5,374	5,374
March 2011	1,389	11,831	691	6,065	6,065
April 2011	1,362	13,193	819	6,884	6,884
May 2011	1,354	14,547	865	7,749	7,749
June 2011	1,535	16,082	631	8,380	8,380

GR OUTCOMES					
Monthly	JOB PLACEMENTS		SSI APPROVALS		
	Cumulative FY 2011/12	Monthly	Cumulative FY 2011/12	Monthly	Cumulative FY 2011/12
July 2011	1,309	1,309	687	687	687
August 2011	1,584	2,893	794	1,481	1,481
September 2011	1,563	4,456	577	2,058	2,058
October 2011	1,503	5,959	647	2,705	2,705
November 2011	1557	7,516	547	3,252	3,252
December 2011	1456	8,972	652	3,904	3,904

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
December 31, 2011

Attachment A

SUCCESS STORIES	
Recommendation	Success Story
#5 - Expanded Housing Subsidy	<p>Mr. S was unemployed and homeless when he applied for the General Relief Housing Subsidy and Case Management Project (GRHSCMP). Mr. S was approved and found affordable housing through the Project. Mr. S was also actively engaged in the GROW Program, which assisted him with his goal to get back in the workforce. Mr. S was able to attend job training and he was also able to keep looking for jobs once he had a place to live. On 2/25/11, Mr. S contacted his Housing Case Manager (HCM) to express how excited he was because he had secured full-time employment as a truck driver on 2/28/11. He spoke with pride and gratitude of this employment with a starting salary of \$16+ per hour, plus benefits. Mr. S. is now self-sufficient.</p> <p>◆ -----◆</p> <p>Mr. B was able to move into his own place in April 2010 with the assistance he received from the GRHSCMP. Mr. B had a history of being chronically homeless. The HCM provided intensive case management and assisted Mr. B to ensure he would not miss any of his SSI follow-up appointments. On 3/4/11, the GR HCM received a notice that Mr. B had been approved for SSI. Mr. B was very grateful for the good news and he expressed his gratitude for all of the help the Project had provided. Mr. B. has exited the GR Program since he has secured his federal disability benefits, which allow him to pay his own rent.</p> <p>◆ -----◆</p> <p>Mr. C was referred to the GR Housing Subsidy and Case Management Project (GRHSCMP) in August 2010. He had been hit by a car while riding a bike and sustained many injuries, including a head injury which affected his memory. Mr. C was homeless and temporarily living in a shack in the back yard of a house. The shack did not have electricity and was not a safe place for him.</p> <p>Mr. C had been denied his SSI claim because he did not have enough medical and/or mental health evidence to substantiate his medical and/or mental health condition. However, with the assistance of his HCM and his DPSS SSI Advocate, a housing subsidy application and a record retrieval request was initiated to assist Mr. C with his SSI claim. While his SSI claim was pending Mr. C was able to secure a rental housing place with the assistance of the GRHSCMP.</p> <p>Mr. C's medical condition had affected him so much that even when he first was interviewed for the GR Housing Subsidy he had indicated that he was not homeless. Additionally, he was not able to indicate, in his SSI claim, all the medical facilities that he had been attending. When the record retrieval documents were returned by DMH and DHS, it was clear that Mr. C's previous SSI application claims did not include enough medical evidence for the SSA to make a determination. Mr. C's new SSI application, which was supported with all the medical records obtained through the Record Retrieval Project, was approved in December 2011. Mr. C has become self-sufficient with the SSI benefits he receives now.</p>
#5 & #9 - Expanded Housing Subsidy and Record Retrieval	

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART

December 31, 2011

Attachment A

SUCCESS STORIES	
Recommendation	Success Story
#8 - Enhanced Disability Assessments and Evaluations	<p>Prior to his most recent physical assessment by St. John's Well Child & Family Center (JWCH), a County contractor, Mr. K, a GR participant, had been medically assessed and found to be temporarily disabled due to a bad back. However, Mr. K's latest medical assessment by the County contractor resulted in a diagnosis of schizophrenia, a condition that had not been identified previously. Consequently, Mr. K was referred for mental health treatment and SSI advocacy assistance through the GR Program. Mr. K was very grateful to GR, medical and mental health staff for the thorough job they did and for identifying his condition which make him potentially eligible for SSI benefits.</p> <p>On October 5, 2011, the JWCH, Inc., CEO shared that a participant came into their office that very morning for a disability assessment. As the disability assessment began, the examining physician asked him to remove his shirt. As the participant removed his shirt the physician said to the GR participant, "you have advanced AIDS." Participant replied, "I never wanted to know." They rushed him to a local hospital and he was entered into the ICU. Later, they followed-up on the status of the participant and JWCH staff were informed if this participant had not received treatment he would have died within the next three weeks. JWCH CEO stated, "So we are making a difference."</p>
#12 – Enhanced Employment Services to Veterans	<p>Mr. B. is an older veteran who had overcome a substance abuse problem and other personal challenges in the past. He knew that he was trying to find employment in one of the toughest job markets, but he was extremely motivated and positive.</p> <p>Mr. B. informed his GROW Case Manager (GCM) that he had electronically applied for various positions through the Employment Development Department. Most of his experience was in carpentry and he wanted to focus on this field, but he also had experience as a Warehouse Driver and ended up applying for a Warehouse Driver position.</p> <p>During a GROW site visit, his GCM informed Mr. B. about a Groundskeeper Training Program at the Veteran's Administration (VA). The GCM also provided Mr. B. with a list of the 50 most common employment interview questions to enhance his interview skills.</p> <p>A few weeks later, Mr. B told his GCM that he had been accepted to the VA Groundskeeper Training Program; he needed transportation and assistance with ancillary expenses. His GCM was very excited about Mr. B's success and issued transportation and ancillary payments.</p> <p>Mr. B. did very well in his training and as his graduation date approached, Mr. B and his GCM looked forward to having the VA offer him a permanent position as a Groundskeeper.</p> <p>A couple of weeks later, Mr. B informed his GCM's office that he was hired permanently as a Groundskeeper by the VA, and would be earning \$14.50 per hour with full benefits.</p>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART

December 31, 2011

Attachment A

SUCCESS STORIES	
<p>Recommendation</p> <p>#12 – Provide GROW Services to Volunteers</p>	<p>Success Story</p> <p>When Mr. A applied for GR at the Rancho Park District, he was assessed as unemployable, during the GR intake process. Therefore, he was exempted from participation in the GROW Program. However, during a conversation with his Eligibility Worker (EW), he mentioned that he wanted to work and requested assistance with finding employment.</p> <p>His EW informed Mr. A about the new Volunteers for GROW Project, and with the assistance of the GROW Supervisor, Mr. A was expeditiously enrolled in the GROW Program.</p> <p>Mr. A was determined to find employment and under the guidance of his GCM, he started an intensive job search, which resulted in permanent full-time employment at the Panda Express restaurant.</p> <p>Mr. A is no longer on GR and stated that he is very happy with his new job. He is an excellent example of a self-motivated GROW participant who took advantage of our caring GROW team and the exceptional services they provide.</p>
<p>#12 – Enhanced Employment Services to GED Holder</p>	<p>Ms. C was 49 when she applied for GR. She had experienced a series of setbacks. Her car was stolen and she had lost her job as a hotel clerk. After exhausting her unemployment benefits, she could not find employment.</p> <p>Ms. C unsuccessfully applied for jobs at all the local fast food restaurants in the Los Angeles. She became frustrated because most employers preferred to hire applicants who have a <u>high school diploma or GED</u>. Ms. C dropped out of school when she was in the 10th grade and never returned.</p> <p>Ms. C told her GCM that she had lost her confidence and was certain no employer would hire her because she didn't have a <u>high school diploma or GED</u>. Her GCM told Ms. C about the GED component and Ms. C requested to be given the opportunity to earn her GED.</p> <p>Ms. C was aware that GROW only required 20 hours a week of participation in the GED component, but she chose to attend 35 hours a week. Six months later, after earning her GED, Ms. C was assigned to Intensive Case Management and found employment at Rite Aid and earns \$12.00 per hour.</p> <p style="text-align: center;">◆ -----◆</p> <p>Mr. H was a homeless veteran who was discouraged because a past felony conviction was preventing him from obtaining employment as a certified medical assistant. After attending several GROW workshops, Mr. H. opened his mind to alternative employment suggestions and feedback from his Fastrak instructor. As a result, he acted upon a job lead at a warehouse where he was offered a position as a forklift operator. After Mr. H told his Fastrak instructor about the job offer, the instructor requested a referral for Mr. H. to complete a forklift certification class, which was approved by his GROW Case Manager. Shortly after completing the class, Mr. H found permanent employment at Nec Logistics as a forklift operator and earns \$9.00 per hour.</p>

Note: New updates are underlined

GR RESTRUCTURING MASTER IMPLEMENTATION CHART
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Attachment A

GROW PROJECTS
STATISTICAL INFORMATION
OCTOBER 2011 – DECEMBER 2011

PROJECT NO.	GROW POPULATION	GROW COMPONENTS			NUMBER COMPLETED IN REPORTING QUARTER	NUMBER PLACEMENTS IN REPORTING QUARTER
		NUMBER REFERRED IN REPORTING QUARTER	NUMBER ENROLLED DURING REPORTING QUARTER	NUMBER CURRENTLY PARTICIPATING (CUMULATIVE)		
<u>12.A</u>	<u>TAY</u>					
	Pathways to Success [Customized Job Club]	461	235	66	98	29
	Computer Application	18	12	4	6	6
	<u>MSARP</u>	173	173	213	56	21
<u>15</u>	<u>WIA COLLABORATION</u>	168	168	90	106	33
	<u>GED</u>	165	160	180	6	15
	<u>LITERACY</u>	102	102	111	26	25

PRIORITY POPULATION			
PROJECT NO.	GROUP	NUMBER ENROLLED	
<u>12.A</u>	<u>VETERANS</u>	322	N/A
<u>12.B/C</u>	<u>Volunteers</u>	36	N/A
<u>12.D</u>	<u>PROBATION TAY</u>	1073	N/A
<u>21</u>	<u>DCFS TAY</u>	69	N/A

GR Restructuring Quarterly Report – Dec 2011.doc Last update (3/12/12)

Note: New updates are underlined

**FEBRUARY 9, 2010 GR RESTRUCTURING BOARD LETTER
RECOMMENDATION #3**

Description	Proposed Plan Update
<p>Recommendation #3 instructed the CEO, the Director of Mental Health, Public Social Services, Health Services, and Public Health to develop a plan using existing resources to the extent available, to integrate services for GR participants who are severely mentally ill, receiving a GR housing subsidy, and pursuing SSI</p>	<p>As a result of the above recommendation, DMH has prioritized fifty (50) Full Service Partnership (FSP) slots for GR participants who are homeless and have a severe mental health need.</p> <p>Below is an update on the GR/FSP Project:</p> <p>Training DMH Clinicians co-located at the followings DPSS Offices have been trained to identify potential FSP participants.</p> <ul style="list-style-type: none"> • South Special • Metro Special • Rancho Park <p>Referrals GR participants are assessed by a DMH clinician who makes referrals to the DMH GR/FSP liaison.</p> <p>The GR/FSP Liaison coordinates referrals with the FSP Navigators. The FSP Navigators are responsible for outreach, engagement and enrollment of GR participants who are eligible to receive the array of FSP services, to include housing, mental health treatment and benefits establishment.</p> <p>Enrollment DMH began enrolling GR participants into the FSP slots earmarked for this population effective December 2011. To date, DMH has received 24 referrals from the DMH clinicians. These referrals are then reviewed to establish that the FSP criteria have been met. Following the review, only potentially eligible GR/FSP participants are referred to FSP Navigators for follow up and enrollment.</p> <p>Currently, it takes approximately five weeks for a participant who is referred to the FSP Program to be enrolled. It must be noted that the length of engagement will be different for each referral as it is client driven and an individualized approach to engagement occurs.</p> <p>In an effort to leverage funding and provide an array of services to this population, DPSS has committed to subsidize a portion of the housing services provided through FSP for this population. DPSS will fund each FSP slot, up to \$400 per month for 50 newly enrolled GR/FSP participants, for a period of 12 months for a total allocation of \$240,000 annually. With the GR/FSP Project, it is anticipated that these participants will be eligible for SSI benefits with available mental health treatment and housing resources. DPSS/DMH will establish a MOU with the details of the GR/FSP Pilot Project. It will include identification of GR participants, tracking and referral process. This MOU will detail the funding mechanism for this project.</p>



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County of Los Angeles CHIEF EXECUTIVE OFFICE

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WILLIAM T FUJIOKA
Chief Executive Officer

Board of Supervisors
GLORIA MOLINA
First District

MARK RIDLEY-THOMAS
Second District

ZEV YAROSLAVSKY
Third District

DON KNABE
Fourth District

MICHAEL D. ANTONOVICH
Fifth District

June 29, 2012

To: Supervisor Zev Yaroslavsky, Chairman
Supervisor Gloria Molina
Supervisor Mark Ridley-Thomas
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: William T Fujioka
Chief Executive Officer
WTF
Sheryl L. Spiller, Acting Director
Department of Public Social Services
Sheryl L. Spiller

REPORT ON THE IMPLEMENTATION AND OUTCOMES OF THE EXPANSION OF THE GENERAL RELIEF HOUSING SUBSIDY AND CASE MANAGEMENT PROJECT AND RECOMMENDATION REGARDING CONTINUATION OF THE EXPANSION OF THE NUMBER OF HOUSING SUBSIDIES

On February 9, 2010, the Board approved the recommendation to implement the restructuring of the General Relief (GR) Program. A major component of the restructuring effort included an expansion of the GR Housing Subsidy and Case Management Project (Project). At that time, the Board instructed the Chief Executive Officer (CEO) and the Director of the Department of Public Social Services (DPSS), to return to the Board in June 2012, with a report on the implementation and outcomes of the expansion of the Project (GR Restructuring Recommendation No. 5) and recommendations regarding the continuation of the expansion of the number of housing subsidies, and not to expand the number of subsidies in effect as of June 2012 without specific authorization by the Board.

Background

The Project was implemented on July 25, 2006, as part of the County's Homeless Prevention Initiative (HPI) with an ongoing \$4.2 million in annual HPI funding.

"To Enrich Lives Through Effective And Caring Service"

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Intra-County Correspondence Sent Electronically Only*

Each Supervisor
June 29, 2012
Page 2

Originally, the program served a total of 900 GR homeless participants. Participants were provided a rental subsidy up to \$300 and the participant had to contribute \$136 of their monthly GR grant towards their rent.

On October 6, 2009, the Board approved the expansion of the Project. Through this expansion, the housing subsidies would be incrementally expanded through December 2014, up to a potential maximum of 10,000 subsidies. The expansion would be fully funded through (a) Interim Assistance Reimbursement of GR grant expenditures and housing subsidy costs, and (b) prospective GR grant savings, for homeless GR participants who receive a housing subsidy and then exit GR with employment, SSI, or Veterans Disability benefits.

Program Expansion

The initial expansion included an additional 640 housing subsidy slots in FY 2010-11. On August 2, 2010, the expansion of the Project was implemented, resulting in a total of 1,540 housing subsidies (900 original subsidies plus 640 new subsidies). As approved by the Board, the GR Housing Subsidy amount was increased from \$300 to **\$400**, and the participant's contribution from the GR grant was reduced from \$136 to **\$100** per month.

Since implementation of the Project expansion in August 2010, 444 participants receiving the housing subsidy have exited GR with SSI or employment. Under the methodology included in the February 2010 GR restructuring board letter, the savings associated with these participants are not sufficient to fund a further expansion of the Project at this time.

Recommendation

The CEO Service Integration Branch (CEO-SIB) is currently conducting a study on the expansion of the Project, as part of the evaluation of GR restructuring directed by the Board. This study is targeted for release by September 2012; it will address the outcomes and impacts of the expanded Project, including expenditures across a wide range of County departments. Following release of the CEO-SIB study, we will provide the Board with recommendations regarding the potential future expansion of General Relief Housing Subsidy and Case Management Project.

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If you have any questions or need additional information, please contact us, or your staff may contact Antonia Jiménez at (213) 974-7365, or via email at ajimenez@ceo.lacounty.gov.

WTF:AJ:DS
SP:JAB:gj

c: Executive Officer, Board of Supervisors

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